



Shattered Moments:

The Fall from My 30-Foot Pedestal

Brooke McKenzie Sroufe

Faculty Advisor: Margaret Sartor

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Abstract

Part One of my final project consists of a series of creative non-fiction stories detailing a traumatic accident I experienced in 2009. The stories examine my physical and emotional recovery. I have also written stories about my strongest childhood memories to explore the events that helped shape the beliefs I held at the time of my accident. The stories are not linear, but span from my childhood to the three years following my accident. Through these stories, I hope to contribute to greater conversations about trauma, emerging adulthood, and identity—particularly among young people.

Part Two of the project analyzes the question of trauma and the necessity of narrative following trauma. I break this section of the project into three short essays addressing different aspects of trauma and narrative: a history of trauma, the need for memoir, and posttraumatic growth. I reference three larger works within these essays and relate the authors' arguments and theories to my traumatic experience and to the process of writing my stories.

In addition to these written parts, I include personal photographs throughout the project. These pictures, like my stories, are not linear. They are visual pieces of my shattered life puzzle, showing me before and after my fall from the 30-foot pedestal I'd created for myself. By connecting these pieces, I was able to find new meaning in my experience, allowing me to move forward in the recovery of my body and mind.

In order to maintain privacy and anonymity, I have changed the names of some individuals in these stories.



In the hospital on October 31 following a spinal fusion operation, Cincinnati 2009

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My brother Mark was my first and best ally. We are quiet sibling souls, but we have such strong love and pride for one another. I will always appreciate the small, but memorable ways in which we demonstrate our bond.

I would also like to thank Margaret Sartor for igniting in me the passion for memoir. Margaret helped me find the confidence to propose my stories as my final project, and throughout her mentorship, she has made me believe in the power of these stories. Margaret’s guidance and mentorship is deeply appreciated.

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Part One:

Shattered Moments – The Fall from My 30-Foot Pedestal

Prologue: Why

In September of 2012, just one month after I moved to North Carolina to attend graduate school, I received a call from my friend Catherine in my hometown of Cincinnati to inform me that our close friend Violet was in the hospital. Violet had fallen. In the early morning hours, Violet, still groggy, wanted to check her mailbox. At the top of her stairs, her toes caught in the hem of her pajamas, and she tumbled down the flight of concrete stairs.

Violet's injuries were eerily similar to those I sustained three years prior: a burst fracture in her L2 vertebrae and a broken ankle. Violet underwent urgent surgery and remained in the hospital for two weeks. Having recently graduated from college, Violet had secured a position at an impressive insurance company and moved into her first apartment. Her life of independence had just begun.

Days later, I received a call from Violet. Tearfully she whispered into the phone, "*No one understands what it's like being in a hospital. No one knows what it's like to think they may never walk again.*" Despite constant visits from family and friends, Violet felt painfully alone. Lying in a hospital is a truly isolating feeling that's hard to overcome.

It pained me that I could not be with Violet in person. I had just started classes and didn't have the money to fly back to Cincinnati. Violet and I spoke frequently while she was in the hospital. She asked me endless questions about hospital procedures, injuries, recovery, and how I found the strength to make it through.

My permanent move to North Carolina in 2012, the same year as Violet's accident, had been a major step in my recovery process after my own accident in 2009. But in the years in between, after graduating college in 2011, I returned home to take a year off after a grueling year and a half of working hard to heal physically and keep up with my schoolwork. When I returned

home right after graduation, I immediately reconnected with my longtime friend Catherine and through her became close with Violet.

Violet and I had known one another for years, having gone to school together since we were nine. We lived on the same street growing up, but we were only ever distant acquaintances. After we both graduated college, however, we clicked instantly, and it felt as though we had always been friends.

Perhaps Violet and I were meant to come into each other's lives in 2011. I'd like to think so. Talking to Violet about my own two-week stint in a hospital and my many surgeries, I was able to see how my stories gave Violet some comfort in knowing that she wasn't alone. Verbalizing my experience also helped me to acknowledge my *own* strength as I voiced aloud all of the things I made it through. As our phone calls became more frequent, I started hoping that the knowledge of my experience would give Violet courage and hope. Those phone conversations also instilled in me a desire to write my stories down. I empathized with Violet's loneliness, and I felt strongly that young people experiencing trauma could find connections with stories like ours. These stories *are* common, and it's important that other young people hear narratives to challenge their own assumptions about the world and understand that they are not alone.

The busyness of graduate school and life in general prevented (or distracted) me from pursuing writing until the fall of 2012 when I took Margaret Sartor's *The Unconventional Memoir* course as a part of the MALS program. The stories I wrote in Margaret's class focused on the first few days in the hospital after my accident. The overwhelming encouragement and positive response from fellow classmates gave me the confidence to pursue the stories I'd started in Margaret's class. These stories are not complete as my recovery process is still ongoing, but I

hope that through these stories, others may find strength in their own being and feel as though they too can overcome life's traumatic obstacles.



Celebrating Violet's 24th birthday in August 2013.

Shattered Moments

It sounded like far away wind chimes – a light tinkling growing louder with the wind. It was the sound all children in my neighborhood recognized—the jingle of an approaching ice cream truck. As the music grew louder, I and the other neighborhood kids, would drop what we were doing and rush to find spare change. We would run in a panicked frenzy, fearful of missing the cool treats.

During those summers of cul-de-sac living, I kept busy playing with the other girls in my neighborhood. Sidewalk-chalk, bikes, make-believe, dress up. We were an active group and played well together. But as soon as we heard that familiar chime, we would run faster than we had during any game of tag, disappearing into our houses before regrouping with change in hand to unitedly decide on the day’s ice cream choice. Even at six years of age, we sought each other’s approval, not daring to be different.

On one particular day, I decided to play in my room, alone. Even though I had many friends, I always sought “me” time, reading Bob Books out loud to my dolls or playing Barbies without interruption or interjection from the other girls. That day I was doing so in the comfort of my yellow Princess Belle nightgown and matching slippers. My slippers were my most prized possession – a Disney World souvenir. Borrowing from the movie *Beauty and the Beast*, the left slipper was designed as Lumiere with the toe of the slipper forming the flaming candlestick. The right slipper was designed as Cogsworth, the wise old mantel clock. In the middle of marrying Theresa to Ken (sorry Barbie), the sound of the ice cream truck floated through my window. *Quick—where is my piggy bank? Where’s mom? Forget it.* I ran through the house for the front door, ignoring my mom’s rule that I could only wear my slippers indoors. There simply wasn’t enough time to change shoes.

As I ran out the front door, I saw the neighborhood girls chatting with each other and waving me towards them. I could hear the truck turning onto our street. *Five houses to go.* Looking first at my friends and then at the ice cream truck approaching, I decided to beat them to the truck. There was no time to consult with them about my ice cream choice.

“Strawberry Shortcake, please!”

I handed the man the total in coins and stepped back to wait for my friends to catch-up and get their ice cream.

Once the hubbub of children scrambling to the truck subsided, we looked around, smiles on our faces, completely satisfied. My innocent summer joy was short lived. It was red-headed and freckled-faced Samantha who first pointed out my slippers. Pointing and laughing, she looked to gymnastics-stocky Amanda for confirmation that my outfit was ridiculous. Amanda, then Chelsea, then Laura all joined Samantha in a fit of laughter, all pointing at my slippers.

“These are my PJs!” I shouted. But their snickering laughter crushed my feelings. I could no longer focus on my ice cream bar. *They are supposed to be my friends. My best friends. Why were they being so mean to me?* As quickly as I ran to the ice cream truck, I ran even faster back to the safe shelter of my home, eyes burning from the tears that were flowing down my face.

My mom met me at the door and must have sensed it wasn't the right time for a lecture. I knew I wasn't supposed to wear my slippers outside, but I did. And now my friends were laughing at me. Through uncontrollable tears, I told my mom that the girls made fun of my slippers. My mom took me in her arms, wiped my teary face and rubbed my back, comforting my broken heart.

“You love your slippers. They are very special to you. You should never feel ashamed of what you love.” I listened to my mom, remembering how much I did love my slippers and how

much they meant to me. *Beauty and the Beast* was my favorite movie, and our visit to Disney World brought the movie to life. Those slippers represented something deep inside of me, even though I didn't have the words to articulate the feeling. My mom didn't expect what happened next.

With a boldness I haven't known since childhood, I left my mom's embrace and marched outside. I didn't run towards my friends who were still eating ice cream. Instead, I took deliberate, determined steps. Each step in their direction was full of intention. When I reached the group, I knew exactly what to say.

"These are my favorite slippers. They're special to me, and I don't care what you think," I said. Just one declaration. I turned and walked back home filled with pride. I'd stuck up for myself.

It's unfair how a small incident at such a young age can leave one feeling untrusting, suspicious, and hurt for years to come, as this one did for me. Because if my best friends could make me feel so bad, then anyone at any time might try to hurt me, right?

High school was filled with drama, but I always kept myself outside the drama as much as I could. On the other hand, I was always there for my friends. I never hesitated to support them through their arguments with each other and their insecurities about themselves. Rather than waste my time looking for the next shallow opportunity to disagree, as many of my girlfriends did, I focused on challenging myself in school. My mom began her college education when I was an elementary-school student, so my idea of a hardworking woman—the type of person I wanted to be—involved focusing on grades and school. Mom would write papers into

the dark of the night as I fell asleep beside her in bed. She typed quickly and loudly, and with each hard touch of the keyboard, I would drift off knowing I wanted to be as smart and determined as she.

I was self-disciplined, and, while my parents didn't institute a curfew, I was overly paranoid about breaking the town curfew for teens under 18. No driving after 11pm, or else. It never occurred to me that I'd actually have to be doing something wrong while driving for an officer to pull me over and deliver the "or else." No, I was a straight-laced teen, too scared to do anything wrong. Sometimes my parents would even encourage me to have more fun. "It's okay to be young," they'd say, "just be smart."

I drank alcohol approximately four times in high school, and it was never very exciting. I distinctly remember the last time. I was friendly with almost all of the 200 students in my class, but I most enjoyed spending time with my four best friends. On cool evenings, we would drive to my friend Xandy's farm and make bonfires. We'd stare into the vast, clear Midwestern sky, and breathe in the scents of fresh cut fields and burning wood. It was the perfect place to let loose. On one particular autumn night during our senior year of high school, we managed to build the biggest bonfire I'd ever seen. It felt so safe to be with my best friends. Even now, the smell of wood burning reminds me of home. That night, I abandoned my uptight, disciplined restraint and decided to let myself have fun. I drank some alcohol and felt loose, but not out of control. We danced around the bonfire like woodland fairies, smiling and twirling through the smoke. My favorite band, Brand New, was playing over the stereo, and we all joined hands, singing out loud, "*I'm going to stay 18 forever so we can stay like this forever.*" I felt invincible.

“You’re so much more fun when you drink!” someone shouted to me. I don’t even know which one of my friends said it, but as the bonfire light flickered across the faces of my friends, I saw they were all smiling and nodding in agreement. Catherine was laughing and slapping her leg like she always did when she got lost in a fit of giggles. Laura, with her beautiful hair and natural looks, shook my shoulders in a manner that assured me it was just a joke, but with some truth to the matter. Xandy chuckled in her deep-throated laugh, still vigorously nodding even after everyone went silent. And Evelyn, who we always knew was so much more mature than the rest of us, smirked and looked at me with an almost pitying gleam in her eyes. In that moment, I felt six years old again. This time, my friends weren’t laughing and pointing at my slippers; they were looking and laughing at me. I felt hurt and confused. *So this was what drinking in high school was all about? People liked you better when you didn’t act like yourself?* Something within me shattered. It had been tears of sadness that filled the eyes of my six-year-old self, but that night, it was tears of anger that filled my heart and streamed down my cheeks.

During all the times I had been with them, I had made a point to avoid drama, so that night was the exception. Questions raced through my mind. *Wasn’t it enough that I listened to their issues with each other? And how many times did I pick up my drunken friends from parties? And how many times did I listen as they called me after fights with their parents? And all the shit I’d talked them through? Did they not value the care and support I provided them as they immersed themselves in teenage angst? Did they like me better as a friend who got drunk and danced around a bonfire?*

I put a smile on my face for the rest of the night, but the next morning when I said goodbye, it was the last time I talked to my four best friends for the remainder of high school.

To this day, all but two of those girls have become total strangers to me. Looking back, I wish I had had demonstrated the same boldness I had as a six year old. But unlike a six-year-old who can find encouragement from a mother's embrace, a teenager doesn't run into the arms of their mother. Adolescence can suck. And teenage girls create endless, stupid drama.

For me, the easiest solution was to forget and move on. Some might call it a grudge. And okay, that's pretty much what it was. I know now that cutting ties was an overreaction to mostly harmless high-school comments, but it's those little things that have, for some of us, such a lasting impact. In my case, those few hurtful comments caused insecurities, such as my questioning whether someone likes me for *me* or the me I change into when I drink. This unsettling hesitancy haunted me and drove me to close myself off from all but a very few people throughout my first few years in college.

Starting college, surrounded by so many new people every day, I felt an even stronger need to protect myself closely from the possibility of being hurt by strangers or even my friends. I longed to be more carefree and feel less deeply, and sometimes I would, on the weekends, have a drink or two to help calm my nerves.

Mom often tells me that people are wired to care at different degrees. I remember when I was younger she tried to explain with measuring cups. She said some people are wired to feel and care as deeply as one measuring cup; others are wired to feel as deep as $\frac{1}{4}$ cup. I guess I'm just wired to care a cup full. And while that sounds like it would be a good thing to care so deeply, it also means that I tend to put too much thought into what people think about me. I fear their disappointment. And caring too much about how others see you can lead to painful shattered moments when you fall off your carefully constructed pedestal of perfection.



My 20th Birthday, in the kitchen of my flat in London three weeks before my accident, 2009

Bright Lights

On October 1, 2009, the coursework portion of my study abroad program was finally over, and I was ready to relax and have some fun. Even though we had been in London for four weeks, I still had not made many new friends. I usually stuck close to Katie and Laura, my two girlfriends from UNC, but when one of my classmates, a girl I'd talked to only a few times, invited me to join her group for a night out to celebrate, I decided to let go of my hesitations and join the fun.

We started as a group of 20. Katie and Laura decided not to join because they still had one more class to attend the next morning, so I was on my own to face the crowd of new people. We started off at a pretty low-key pub near Camden Market, drinking a pint and chatting away about the final assignments about British economic policy that we had all cranked out at the last minute a few nights before. Once everyone started loosening up a bit, we headed to a gritty club nearby. Neon lights shine through my memory of the place. It was dark and crowded with dancing, sweat, and cigarette smoke as thick as early morning fog. It was a place where it was easy to lose your friends and maybe even yourself, and it ended up being the latter of the two that fell from my grasp.

After hours of mingling with strangers, laughing and dancing, somewhere in the thick cloud of my mind, I knew it was time to go home. I convinced a classmate, Will, to go back with me and he did. We lived in the same flat, and as typical college students, the minute we walked by the kitchen on the third floor, we decided a few more minutes awake wouldn't hurt. We knew putting some food in our stomachs would be our saving grace when we woke the next day. We sat on the floor of our kitchen with the refrigerator door wide open, talking about school, relationships, and my obsession with London. We got excited when we discussed our

shared observation of the Londoner's love of roof terraces. Our kitchen faced the backside of another flat, and our backyard neighbors were always on their terrace drinking morning coffee or evening wine. Our building didn't have a finished terrace, but there was a flat rooftop with room enough to gather right outside our kitchen window.

“Let's go out there. Let's go on the roof.”

It's so bright. These lights are so bright. And my head is spinning. And that sound, that buzzing sound. It's driving me crazy. Everything is so loud. I don't understand. Where am I?

My eyes were still adjusting to the white room and bright lights shining down on me. I had no idea where I was or why everything appeared so bright. A woman handed me a phone—she was wearing a police uniform. I heard my mom's voice. “Broooooke? Every time my mom answered the phone, she would draw out my name like she was asking a question. “Broooooke? It drove me nuts. But this time her voice was less quizzical and more frantic and confused. And she was crying.

“I'm so sorry. I never do this. I'm a good person. I'm so, so sorry. I love you. Mom, please forgive me.”

The words spilled from my mouth immediately, but I wasn't even sure why I was apologizing. My mom kept saying my name. Only it was no longer a question, it was as though she was reassuring herself that it was actually *me*. That I was actually on the phone. She started to speak full sentences, but I couldn't understand what she was saying. Her quivering voice caused a big ball to form in my throat, and I could feel tears starting to burn my eyes.

Overwhelmed, the tears started to flow and I couldn't stop them. I no longer heard my mom's voice, and as I turned my head to see where the phone had gone, it felt like someone dropped a cement brick on my head. The sharp pain shot all the way down my spine.

I cried out in pain and immediately there were three people surrounding me. Trying to locate the source, they turned me from my back onto my right side, and again, I heard myself produce a scream from deep inside my lungs. My hips. My hips felt like they were on fire, and my body collapsed into the arms of the strangers still supporting me. It felt as if I was watching a black-and-white movie, only in slow motion. I soon realized the strangers were nurses. *Okay, so I was in a hospital. But what hospital? And did that even matter?* Not once had I noticed a hospital since arriving to London four weeks earlier.

As the nurses delicately moved my body, a throbbing pain filled my elbow. Every movement felt as though someone was hammering a nail directly into my arm. As long as no one moved me from my flat position, the pain in my back was tolerable, but as I clenched onto my elbow with a strength previously unknown to me, I couldn't help but yell, "Don't fucking touch me" to anyone trying to release the grip on my left arm. It was a pain so severe that I felt certain I would black out if I let go.

I made it through those first few dizzying, nightmarish hours in the emergency room, thanks to the pain numbing morphine drip. I awoke hours later in a recovery room and not long after I did, Will, with flowers in hand, walked into the room. His eyes were puffy and an odd yellow film spread across the whites of his eyes. He appeared to have a really bad hangover, though one might also attribute his appearance to what he had witnessed the night before.

From the kitchen window, Will watched me fall three stories to the ground.

The nurse who led Will into my room was kind enough to let me see the flowers but then informed us that flowers were prohibited as a measure to prevent the spread of germs and bacteria. My program director and study abroad advisor had arrived with Will, and I began crying and apologizing as I did on the phone earlier with my mom.

“I promise I never get in trouble.” I felt shame and disappointment. *How could I have caused so much trouble?*

The director assured me that my apology was far from necessary. I could see only sympathy and relief in her glassy eyes.

In a hazy state of his own, Will helped me piece together the events that were lost in my subconscious. Will explained that as I balled-up my body to fit through the kitchen window, I didn’t notice the space between the rooftop and the building. It was a narrow gap but large enough for the building’s pipes—and large enough for me to slip through. I tried hard to recall the gap but couldn’t. (Clearly, the gap gave new meaning to London’s famous saying, “Mind the Gap.”)

I don’t know what could be more horrifying: falling 30 feet or watching someone else fall 30 feet. At least I had the saving grace of blacking out from the pain. Will informed me that I was conscious and answering questions when the medics arrived. In a fetal position, 30 feet below the kitchen window, I was able to express the pain engrossing my body. That day in the hospital recovery room, I didn’t ask Will if he rode to the hospital in the ambulance with me. I did wonder – and shuttered to think -- what it must have been like for the other students who were shaken from their sleep by sirens, shuffling boots of medics, and probing questions from police detectives.

I was alive, but with a fractured pelvis, collapsed lungs, four hairline spinal fractures, a burst L2 vertebrae, distal humerus fracture, and cracked teeth. My entire body was broken.

Waiting for the Moment

“Your mother’s flight has departed Cincinnati. She’ll be arriving at Heathrow in the morning and plans to come straight to the hospital.”

As quickly as the prison warden-like nurse marched over to my bed to make this announcement, she was gone. But her stern British accent lingered in my head like the voice of eternal judgement as I tried to prepare myself for the moment when I would come face-to-face with my mom. My heart pounded and my face became hot and flushed as I looked around at the six other people sharing the recovery ward. Three of the six had family members at their bedsides.

The woman to my right had two daughters who had been there the whole day, pampering their beautiful Persian mother. They brushed her thick, black hair, painted her face with deep shades of makeup and sprayed her with a perfume that smelled like exotic spices. She looked positively royal. I didn’t know what her ailment was. The only time her regal exterior disappeared was when the nurse arrived to administer her regular suppository while everyone in the room overheard.

Directly across from me, a middle-aged Indian man smiled and laughed as seven family members surrounded him, speaking animatedly in Hindi. A woman in a bed by the corner spoke in a hushed manner with a man holding her hand. I imagined the man to be her husband.

The hospital ward housed both men and women, young and old, and was the antithesis of an American hospital. Though I had never been injured before, I knew patients in America had the comfort of recovering in their own rooms. I imagined rooms designed with earth-tone, healing colors that soothed patients -- not the sterile whiteness that enveloped my shared London recovery room. Although the décor was nothing like I expected, seeing family members visit

their loved ones was a common tie to life back in America. I never questioned the likelihood of my mom flying across the Atlantic Ocean to be by my side. She was my mom, and she loved me. She would be there as soon as she could.

Although I spoke with my mom on the phone before she left the States, I could only recall crying and my profusely apologizing to her. I had never been in trouble before, but there were dozens of times I had witnessed my parents' angry reactions when my brother, Mark, disappointed them with some wrongdoing. Now it was my turn.

My older brother Mark and I were always being compared to one another by family members, friends, and even teachers. Only two years apart, we'd hear things like, "you two are like black and white," "you and your brother are like night and day." Most of the time, these statements were meant to comment on our demeanors and personality. Mark was generally very quiet. He liked to draw and had notebooks full of rap lyrics, which read like poetry. He never spoke to my parents or me about his feelings, and it was only when I would sneak into Mark's room to look through his notebooks that I realized how sensitive of a soul he had.

Despite his quietness, Mark tended to get in trouble. Though he never got in trouble at school for fighting or saying inappropriate things—unlike his friends who usually did—his discontent centered on academics. As a result, many of his teachers would request meetings with my parents. My parents never told me what they would discuss with Mark's teachers in high school. I learned years later that my brother's third grade teacher told Mark that he wouldn't excel. This single statement might not have been the catalyst for my brother's severe introversion, but I believe it likely had a lasting impact on his sensitive sense of self. My ears

burn thinking about a grown man, a teacher—a person who is supposed to help children grow, and whom children are supposed to trust—telling a young child that they will not be successful in life. I have no doubt this teacher’s intentions were seeded in racism. I cringe to think that someone was capable of saying to me, “You got the white genes and your brother got the black genes.” But they were, and probably still are. Fortunately, I heard statements like this on only rare occasions. I do wonder how often Mark was subjected to this kind of malicious thinking, though. For a biracial male adolescent, such comments can be permanently harmful.

My mom is a petite, auburn-haired woman whom I often jokingly call a leprechaun. She has beautiful blue eyes and a tiny face – a face strangers often say is familiar to them. Dad is small too. In fact, we’re all pretty small. He has a boyish face, and when he isn’t cracking jokes or exercising, he tends to escape matters of family by watching reruns of old, idyllic black-and-white movies and television shows. Mom is always in charge. She is the good guy and the bad guy, and when she becomes the latter, it is truly terrifying.

We are a family of introverts, though varying to different degrees. We are quiet people. Most of the time. The memories I have of my parents yelling at Mark about his grades resonate quite loudly in my mind. Although it was usually mom who was leading the discussion, I knew things were serious if I heard my dad contribute as well. These confrontations always happened in the dining room in the same chairs where we sat every night for dinner. My parents’ backs would face the entryway to the kitchen, and Mark would sit on the other side of the table. When these confrontations occurred, I would hid in the stairwell that emptied out into the kitchen, so my parents could not see my head occasionally peeking around the wall into the dining room as I

tried to catch a glimpse of my brother. I didn't want to make my presence known, so I sat as still as I could, though I'm sure the natural creaks of our old, wooden staircase gave me away on occasion.

Growing up, Mark and I were the only two occupants on the second floor of our house, and even though we may not have had similar interests or considered each other friends, our shared bathroom and connected closet made us natural allies. The stairwell was the path to our family's common grounds. As I winced and watched, I never understood why Mark couldn't just try harder in school or surround himself with better people. As my parents' voices hit octaves higher than normal, I cried for my brother. Mark would sit across from them in silence, taking their punishments without flinching. When I was brave enough to peek around the wall, Mark would catch a glimpse of me, and our eyes would lock. I was always envious of my brother's stunning green eyes, but during those confrontations with my parents his eyes would appear empty. Only the tears running down his face gave his pain away. It was at those moments that Mark's pain became my pain, and I wanted to take it all away for the both of us.

Inevitably, after these verbal confrontations, my parents walked ahead of Mark, leading him up the stairs to his room, where they disassembled his XBox and carried the parts with them as they retreated downstairs. No words were exchanged during this exercise; Mark would just sit on his bed, facing away from my parents in anger, but I think also to hide the tears that he couldn't stop from filling his eyes. By then I would have already scrambled quickly to my room so my parents wouldn't know I was eaves-dropping. When I heard their footsteps headed back downstairs, I would enter our shared closet and knock on Mark's door for permission to enter. There was no real reason to go into his room through our closet rather than the door, but it felt more like our safe territory than crossing the open hallway outside our rooms.

We would sit in silence in his room, each lying belly down on one of his twin beds, staring at the now useless TV until one of us dared to say something. It was almost always me who would crack a joke or invite him over to my room, where my computer and video games were still in working order. I never asked him the question I was always thinking: *Why can't you just do what Mom and Dad say? Why can't you just try harder to please them?*

Because I never asked, I never fully understood Mark. But I did understand that I never wanted to be in his position. I never wanted to face the dramatic transformation my parents underwent when their own child caused such frustration and disappointment, their faces contorting into haunting caricatures that looked like masks straight from *The Twilight Zone*. I didn't want to ever find out what it felt like to be yelled at for something you did wrong and couldn't take back, something that could have been avoided.

I was a senior in high school, in the midst of filling out my own college applications, when Mark decided to drop out of Ohio University. He'd been on academic probation during his first year, and his second year hadn't been going much better. This time around, Mark didn't move back home. He wasn't around for us to sit silently together, contemplating our parents' disappointment. My parents began to speak openly about their confusion, not caring that I was also sitting at the dinner table, able to hear their concerns and vulnerabilities. "Where did we go wrong?" "What could we have done differently?" "Did we push too hard? Are we just bad parents?" It was an awkward time. I felt like I was betraying my ally when I listened to our parents' concerns, but I didn't report back, and I couldn't provide Mark a reassuring glance. I also never defended him, which I deeply regret to this day. Even though he wasn't living at home, I still cried for my brother, and I also started to cry for my parents. I vowed not to cause them the same distress they had felt from my brother for so many years.

With only 12 hours' notice of my mom's arrival and nowhere to go, I was stuck, lying alone in my hospital bed, without even the blank screen of a TV to stare at while I contemplated my fate. To occupy my mind, I made up the relationships and life stories of visitors who came to see other patients in that 12-hour time period. I thought about Mark and wanted my brother there in the bed next to me, cracking stupid jokes like I had done so many times to cheer him up. The physical pain was subdued thanks to medicine, but it didn't keep my cheeks from burning in anticipation or my heart racing from the fear of what to expect. I was so sure that my mom would scorn me for my stupid decision. I also worried about what the other patients in the recovery room would think when she did. Unlike my brother, who faced my parents in our own home, in the privacy and (dis)comfort of his own dining chair, I was going to face my mom's anger in a cold room full of witnesses. Even if she didn't yell, I had seen how awful her soft, yet stern voice could make my brother feel. And I was terrified to finally be on the receiving end of her disappointment.

My hospital bed faced the doorway of the recovery room, so I saw my mom in enough time to close my eyes and hold my breath as I anticipated her first words to me. When she finally approached my bedside, my eyes betrayed me as tears trailed down my face. I didn't say anything, didn't move or make any noise at all. She embraced my broken, frail body and allowed me to silently sob into her arms. I didn't care that my whole body hurt as I weakly leaned into her. She gently brushed my hair with her hands, and rocked me back and forth. She did not treat me like I had done something wrong. She did not lecture, or berate, or look at me with disappointment. She just held me tightly until visiting hours ended. We didn't exchange more than a few words with each other the whole day. Everything we both felt was communicated clearly in her motherly embrace and my desperate need to be held.

When mom came back the next day, not a minute after visiting hours began, she told me how sorry Dad was that he couldn't make the trip to come see me as well. She didn't need to say anything more; I knew the financial burden the last minute overseas flight must have placed on my parents and completely understood. Mom also let me know that Mark cried and cried when they told him what had happened to me. And I don't think she realized how much it meant to me when she told me this. My brother—my ally—cried for my pain just as I had cried for his pain so many years before.



My final days preparing to return to the US, London 2009

My Boa & Tiara

For the next seventeen days, I was stuck in a room surrounded by seven other ailing bodies. Any time I tried to eat, I would throw up due to the nauseating effects of the morphine drip. It was a love-hate morphine relationship. I don't think my roommates minded the sound of vomiting though, especially my neighbor who was given a suppository every evening before bed. The thin blue disposable cubicle curtain that separated us did little to drown out the sounds of my getting sick, and I was graced with the ever so natural sounds of my neighbor's explosive relief each night. The only upside to not being able to eat anything was that I never had to go to the bathroom which required the odd-shaped, uncomfortable pink bed pan.

Although I despised being in the hospital, I was still safe from the questions and judgments and pitying faces of my family and friends back in the US. How would I explain to them what happened? How would I admit to them that I had gone from an honor student at one of the top public universities in the country to one of those irresponsible teens you hear about in the news every spring break, the ones who fall off a balcony in Panama City and die. For someone who had always avoided drama, I dreaded not only facing my mom but going home and being at the center of the spotlight. And in my fear of returning home, I actually envied those spring-break fatalities. At least they didn't have to experience what felt to me like the very worst kind of pain: self-reproach.

During those 17 days, my mom was by my side every visiting-hour moment. Many of the afternoons were spent in silence, but having her sitting in the chair next to my hospital bed helped cure the inevitable loneliness that closed in on me each night when the nurses turned out the lights.

Three medical delays kept us from boarding a flight to Cincinnati, though we were only informed of two. The first issue was my collapsed lung. I had to let it heal before I could handle the air pressure on a plane for 9 hours. Second, there was of course my back. I could not be mobile without a custom back brace, which took a week to construct. The third issue was health insurance. My insurance company had to approve my travel back to the United States. Ultimately they had the final say about when I could fly, so my mom and I had no choice but to trust that the delay was due to a legitimate reason.

During the second week, my stay in the hospital started to feel a bit excessive. Nurses continued to take my vitals throughout the day, but doctors stopped their daily assessment. Communication with clinicians was challenging.

On day 12, my back brace arrived. It supported my spine from the bottom of my neck to below my hipbones. The brace looked like something out of a sci-fi movie, a contraption meant to immobilize or control its wearer, and it wasn't discreet in any way. The section of the brace that stabilized my abdomen was essentially two padded pieces of plastic on the front and back held together by rods. The brace opened like a door and once around my back enveloped me. The front had another metal bar that supported a chin pad that helped stabilize my neck. It took both the nurse and my mom working together to fasten the brace. But once on, I was ready to walk.

It's surprising how quickly your legs forget how to walk. But when your body is frail and you've been in a horizontal position for 16 days, your brain loses trust in your legs' ability to support a body. With the assistance of the nurse, I stood up. My legs felt like noodles and I was quite wobbly. My mind must have unconsciously feared moving because even when I told my legs out loud to move, it took a few moments before my feet pushed forward and lifted off the

ground. With the nurse by my side, I scooted slowly down the hallway about nine feet, turned, and scooted back to the room. My first journey in two weeks was a success. On my second walk the following day, I was ready to take the risk and lift my feet off the ground.

By day 15, Mom and I grew frustrated. We didn't understand what was causing the insurance company to delay my return. The hospital administrator assured us each day they were in constant contact with our insurance carrier. However, we began to grow suspicious, so my mom contacted the company directly. It was then that she learned the insurance company had not been contacted about my accident.

We had no idea why the hospital would lie to us and say they had reached out to our insurance company when that simply wasn't the case. During the phone call, my mom also learned that, per our insurance plan, I should have been immediately transferred from the public hospital to a private one. My accommodations would have been much more comfortable. At the time, we were furious, but looking back now, I almost think I needed to be in that particular hospital because my hospital ward roommates certainly provided a reminder of the outside world, not to mention the comic relief I occasionally needed during my stay.

Once the travel insurance became involved, the rest of my stay in the hospital was to prep me for my return. I had a CT scan done the same day as my mom's phone call to insure my lungs were indeed healed and healthy. The following day there was another milestone. A shower.

Thanks to my mom's brushing and braiding, my hair didn't look *that* bad, but I did not want to go on an airplane in full view of the public without washing my hair. Plus, the sponge baths that occurred every few days simply did not scrub away the smell of the hospital on me.

Finally on the 17th day, it was time to leave.

Once we arrived at the airport, I was astounded by how strict the security was, even for someone in a wheelchair. We arranged for a wheelchair service in Heathrow and then in Chicago where our layover was, but getting the wheelchair was the easiest part. When it was Mom's turn to go through the security check, she went through the motions everyone goes through these days—she removed her shoes, took off her coat, walked through the scanner, put her hands up, and waited on the other side for a thumbs up. With Mom on the other side of the scanner, though, there was no one to push my wheelchair further. Security allowed my mom to come back around the scanner and help me, but they thought all she needed to do was help me out of my chair.

“She needs to remove her brace and come through the scanner. Her chair will come separately,” an attendant said.

Flabbergasted by the directive, Mom and I just stared at the security agents. When Mom finally registered what they were asking of me, she said, “She can't remove her brace, and she can't walk. Her back is broken. Can't we just wheel her around for a manual inspection?”

I swear security agents at airports must hate giving pat downs as much as travelers hate receiving them. The agents looked somewhat offended by Mom's suggestion, but reluctantly someone agreed. They opened the gate to wheel me to the other side, and didn't even bother patting down my brace or wheelchair. All they did was rub a hand swab up and down to test for explosive debris. Clearly, that would be the giveaway if I were really trying to cause trouble in my wheelchair.

The benefit of flying first class was that we had access to the Delta Sky Lounge. With a full two hours before our flight, we wanted to take advantage of the free food and drinks, but most importantly the quiet. I hadn't been out in public in over two weeks and I'd definitely never been such an obvious target for people's stares. And if I were in their shoes, I probably wouldn't

be able to help staring either. After all, I had a strange contraption holding me together. My casted arm didn't fit with the rest of my body in the wheelchair, so I had to prop it on the outside of the chair for all to see. And since I had not been able to consume a full meal during the two weeks in the hospital, I looked famished and pitiful. I'd lost all color in my skin. Strangers stared because they felt sorry for me. And they stared because they were happy they weren't in my position.

After the ordeal with the Heathrow security check agents, I kept my head down and stared at the ground, letting Mom wheel me through the airport gates. Even though I was incredulous that the security agents held me up in the line thinking I could walk through the scanner, a part of me felt like it was my fault for delaying everyone behind me, and I didn't want to lift my head to see anyone's annoyed gaze. When Mom pushed my chair up to the Sky Lounge ticketing agent, the woman quickly scanned over our tickets. I must have looked completely out of it because the woman stretched her body over the check-in counter, paused, and asked my mom if I could speak.

"Yes, she's able to speak, she just can't walk." My mom was able to keep her cool and her voice remained soft as always, but I immediately glared up at the woman with a look that said, *I'm in a wheelchair, I'm not mute, dumbass.*

After finally settling into the Sky Lounge, Mom and I were able to relax. I'd made it through all the hubbub of London Heathrow and faced more people than I had in a long while. It was impossible for me to get over being self-conscious about being in a wheel chair with an obtrusive back brace, but I was thankful to be heading home. I was nervous about facing my dad and family members, but I couldn't wait to get home to my bed. At the time, all I was told by the London doctors was to take it easy for a few weeks with my back brace and to find a doctor that

could remove the cast around my elbow. Easy enough, I thought. I'll have plenty of time to rest comfortably in my bed and prepare myself for returning to UNC in the spring. I remained occupied with thoughts of returning to school throughout the flight back home, feeling blessed that all the physical pain was behind me and looking forward to a return to normalcy, or so I thought.

I saw a neurosurgeon less than a week after returning home. We understood my back was broken and would continue to heal by wearing the brace. At least that's what the London physicians assured us. In seeing a neurosurgeon, though, my hope was to get a better back brace and orders for physical therapy. Dr. Kuntz was a renowned surgeon in Cincinnati and came recommended to us from a spinal surgeon we had originally reached out to upon my return. The hospital in London had given me a fat white envelope with all of my health records and the X-Rays taken during my stay. I dropped the envelope off at Dr. Kuntz's office so that he would have time to review before my appointment.

On the day of the appointment, my mom and I were led into an examination room where my X-Rays were hanging. Several physicians arrived, one of them being Dr. Kuntz. After quick introductions, Dr. Kuntz reported five fractures. Four of the fractures were hairline fractures and would continue healing on their own. The fifth fracture, the lowest one on my L2, was a burst fracture. Dr. Kuntz then cupped his left hand into a "C." He pointed to the burst fracture on the X-Ray and said, "If you don't have surgery, this is what your spine will start to look like . . . a 'C.' As your spine continues to heal, you'll start to become hunched."

Dr. Kuntz ordered an MRI of my spine and scheduled surgery. He explained that he needed to remove the fragments of the burst vertebrae and insert cadaver bone as a replacement. He then needed to insert a rod and pins to stabilize the vertebrae from shifting into my spinal canal. This news terrified me as I'd never had surgery before in my life, but what was even scarier to me was thinking about what would have happened if I'd never gone to see Dr. Kuntz. If I'd taken what the London doctors said as a final recommendation, I could have suffered much worse.

On October 26, 2009, my dad took me to have an MRI done in preparation for my surgery. I had a consultation with Dr. Kuntz on the 28th, and my spinal fusion was scheduled for the 30th. At the pre-op consultation, Dr. Kuntz pulled up the MRI scan and walked me through the 3-D images. Within seconds, I could identify the burst fracture. My stomach felt uneasy and I grimaced at the sight as I looked at such a revealing image of *my* body. Dr. Kuntz was so engrossed in the scan he didn't realize I had no desire to look at it. Although the idea of examining my own spine made me uncomfortable, I was in awe at how dedicated Dr. Kuntz was to explaining the details of my surgery. I had complete faith in his expertise.

On October 30, 2009, I arrived at the Mayfield Spine clinic for the first surgery I'd ever had. My mom and dad accompanied me when I arrived at 10am to fill out paperwork and meet with Dr. Kuntz to once again confirm the day's procedure. In our first and second appointments, Dr. Kuntz had explained that I'd need bed rest for up to three months post-surgery to recover fully. I didn't fully believe it'd take me that long to recover, so I continued to tell myself I'd be returning to UNC in January for the spring 2010 semester. October 30 was also the day to register for spring classes, so once I changed into my hospital gown and was propped up on the hospital bed waiting for my IV hook-up, my parents handed me my laptop so I could log on and

register for classes. I wasn't going to leave my spring semester classes up to chance, so I decided it was better to register and then withdraw if needed than to wait out my recovery and end up with the last classes of the bunch.

Although my surgery was planned that day for noon, I didn't head into the operating room until 4pm. Dr. Kuntz's first surgery of the day lasted much longer than anticipated, so all I could do was wait. I remembered being cold all the time in the London hospital -- not so at the hospital in Cincinnati. My hospital gown was hooked to an air pump that filtered in warm air to keep my body warm. I was covered with pillows and blankets and was actually much more comfortable than I had expected. The pillows and blankets and warm air didn't make the IV process any better, though.

After my constant bouts of nausea in London from the IV morphine drip, I wasn't looking forward to another IV. In London, it also became clear that my tiny veins seemed to reject any attempts to puncture them in hopes of inserting an IV needle. This time around was no exception. After many pokes, the first nurse couldn't find a suitable vein in my forearm. This led to a second nurse coming in to assist in the pre-op. The second nurse was much more aggressive and patted my arm to the point that I thought it was going to bruise. In the name of better circulation, she said. After just one attempt at sticking my arm again, she failed like the first nurse and decided to try my wrist.

My wrist proved even more difficult. There was some hope when the two nurses worked together to stick my right wrist and initially the needle stayed put. But once the nurses let go of my hand to get the IV equipment, the needle slid out of my arm and a spurt of blood shot across the wall. The splatter stain of blood looked like something out of a movie, and the nurses were stunned as they realized my blood made it onto their scrubs as well.

Finally, inserting the needle in a vein on the top of my right hand proved to be successful, but with all the nerve endings right around the thumb, it was also the most painful. I winced in discomfort every time the nurses flushed the IV. It burned and my hand felt hot, and like the nausea that made me resent the morphine drip, that burning sensation made me resent the IV fluids that kept me hydrated.

Once 4pm rolled around, I was finally wheeled into the operating room. It was late evening when I woke in a recovery room, greeted by my parent's faces. Groggy from the anesthesia, I don't remember much from that first night other than pain. It wasn't the same sharp, unexpected pain I felt waking up for the first time in the London hospital. This time it was more of a deep aching sensation in my back. As I'd learned in London, sleep was the best cure for pain.

The next morning, my parents arrived at the hospital bright and early. My brother had been in the waiting room the day of my surgery, but I didn't see him before heading into the operating room or before falling asleep for the night. I was much more chipper that second morning, though still in deep pain. I had quite a few visitors as well. My grandma came to see me with flowers and our close family friends—the Glassmann's—visited. Joy Glassmann knew me well, and she was well aware I didn't love the idea of visitors seeing me in my weakened state. So Joy brought a feather boa and a plastic tiara to help lift my spirits and, given that it was Halloween, the gesture brought a smile to my face.

My time in the hospital was expected to be three days total, however I ended up staying in the hospital for five. Not because there were any complications, but with the amount of pain I was experiencing, Dr. Kuntz wanted to keep monitoring me for longer than planned. I had also

been fitted for a custom back brace, one I was told would be much more comfortable and fitted to my body. The new brace alone made the extra two days in the hospital worth it.

During the last two days in the hospital, a young male nurse named Chris was my primary caregiver. Chris had attended Miami University and knew quite a few of my former high school classmates. It was fun having someone younger to talk to since most of the nurses were older women in their late 30s. But my appreciation of Chris changed quickly on my last day in the hospital when he had to help me onto the bed ban. I had already gotten over the embarrassment of having him help me on previous occasions, but on the last day, he hit me hard with some embarrassing news. I'd started my period the night before and had no idea. It was all over my hospital gown and the sheets, and Chris was the sorry soul who discovered this fact of Mother Nature. He politely offered to get a female nurse to help me change my dressings, but the damage was done. We were both mortified. I never saw Chris again after that – likely because he didn't want to face me. Or perhaps he knew I couldn't face him.

As the nurses prepped me to leave the hospital on my last day, I was still in pain, quite a bit of pain. My new custom back brace was comfortable and stabilized my back, which helped diminish the aching a little, but in my heart I knew it would be a long recovery process. My eagerness to register for spring classes had been in vain. I wouldn't be returning to North Carolina in January. My head throbbed thinking about the demands my recovery would require of my parents. These concerns weighed heavily on my spirits for most of my recovery.



My first journey out of the house after spine surgery - holding my niece in the hospital the day she was born, Cincinnati 2009

Abner!

Being from the Midwest, I usually claim to be free of regional accents. The *one* exception is how I pronounce “dad.” *Day-uhd*. My dad jokes I say it this way because I’ve secretly wanted him *day-uhd* since my toddler years. Morbid, yes, but this long running joke between us is an apt indicator of the dynamics of our relationship.

Of course I’ve never wanted him dead. The truth is, although I have a lot of memories of my childhood, my dad just isn’t in most of them. Sometimes I wonder how different my life may have been had he not existed. That is, aside from the obvious fact that *I* wouldn’t exist.

Of course I know my life would be different. But for most of my childhood, it was my mom who stayed at home with my brother and me while Dad worked. Sure, he provided for our family financially. But I don’t believe my dad ever felt comfortable with fatherhood, or at least not in the traditional way I understood it. Dad was never the overly protective father, suspicious of any boys his daughter hung around with. Yeah, he played ball with my brother every once in a while, but they weren’t the best of buds, not in an Andy and Opie kind of way. When I conjure memories of growing up, I see my dad and I hear his voice, but none of the actual words he said. There’s noise, but no words, kind of like the parents in Charlie Brown.

One clear memory, though, is that Dad loved his black-and-white movies and TV shows. We never had cable TV in our home, but rest assured, there was always some old 1950s or 60s movie or sitcom on the few local channels we did have. The movies were a bit too long for us kids to get through, but TV shows we *all* enjoyed together were the short sitcoms, such as *The Andy Griffith Show*, *I Love Lucy* and *Bewitched*. Mom and Dad would sit on our big green leather couch, and Mark and I would sit at their feet on the carpet. Whenever something funny happened on a show, Mom would chuckle quietly and Mark and I would giggle uncontrollably in

a silly childish way. Our giggles were loud, at least louder than Mom's. But Dad's laugh overtook the room. Dad's laugh is more of a loud "YUH!" with a hard knee slap to compliment, followed by a few softer slaps. "Oh my gosh," and "Can you believe that" might also be heard after his knee thumps. As funny as whatever was unfolding on the TV, Dad's laugh was the real entertainment.

Just like those shows had lesser stars in their cast -- Barney Fife, Fred, and Gladys the nosey neighbor -- my dad, Randy Sroufe, was the b-character in our family. He was there and he was loveable, but he was mostly there for the jokes. Even during the few times Dad asserted his fatherly authority, he made a joke of whatever lesson he was giving. It baffled me as a young girl, but later, during my teenage years, this constant joking genuinely bothered me. I didn't understand his way of handling fatherhood. I sometimes wondered if he wished our family was more like those families we watched in "his" sitcoms, always playful and able to overcome a problem with a little humor.

I'm thinking about this now, at twenty-five, because I'm just beginning to grasp why my mind always returns to this one thoroughly awful and extremely vivid memory. It was after dinner, and I was about six or seven. I was eating a delicious bowl of vanilla ice cream, and while I knew the rules, it was hard for me to stay in the kitchen. Michael and Janet Jackson's new music video for *Scream* was playing on the TV, and the 90's were *all* about those music videos. I just couldn't resist sneaking a peek at the TV in the family room.

Dad and Mom were upstairs. Mark was, appropriately, sitting at the kitchen table, way too focused on his own bowl of chocolate ice cream to notice what I was up to. Besides, I knew he wouldn't tell on me. So I took the chance.

The family room had just been redecorated with plush cream-colored wall-to-wall carpet. From their bedroom, there was no way Mom and Dad could hear my footsteps, so I tip toed barefoot from the kitchen table to the edge of the family room. I was standing at the edge of the carpet, just close enough to get a better glimpse of the TV. I was close enough to the kitchen to have one foot in and one foot out. But the sound of Michael Jackson’s music was hypnotizing. Without even noticing, I began inching closer and closer to the TV. A kid’s life. Enjoying my ice cream and swinging my scrawny hips from side to side. I was lost in the pleasures of frozen dairy and pop tunes. I didn’t hear my dad come down the stairs, round the corner, and quietly inch up behind me. Looking back, I imagine him watching me with an evil grin, plotting his next move.

“ABNER!” My dad yelled.

Prior to that, I didn’t know such a high, screeching pitch could emanate from a man’s vocal chords.

“ABNER!”

My feet rooted themselves so deep into the carpet that the bottom half of my body froze like a tree stump. My arms, however, were utterly independent of my petrified legs, and they flung wildly into the air, each in different directions, like branches suddenly sprouting. My hands flattened like leaves thereby releasing the carefully cradled bowl and all the vanilla goodness all over the new carpet. Ask my dad, and he’ll tell you that the bowl spun several times, turning as if in slow motion before landing perfectly onto the carpet—ice cream side down, of course.

“ABNER!”

I will hear that scream in my head till the day I die.

Why on *earth* did my dad choose to scream “ABNER”? Simple. In our family, one of our mutually favorite moments in *Bewitched* is the oft repeated scene when the Stephens’ nosey neighbor Gladys spies on the young couple. Predictably, any time Gladys peels open her curtain, peeking her long neck out the window, and sees something out of the ordinary, she yells for her husband Abner to come see. “Abner! Take a look at this!” Of course, by the time Abner finally gets to the window to see whatever it is his wife saw, the magic is over and done and poor Gladys is left to defend her nose-y ways.

When Dad caught me breaking the house rules, which was extremely unusual for me, he wanted the whole house to know. So he yelled “ABNER!”

Almost instantly, Mom and Mark came running to Dad’s side. While they may have missed the bowl toss, they arrived to see me, sprawled out like a felled tree with the ice cream splattered all over the carpet. They laughed. Why wouldn’t they? It was a perfect black-and-white slapstick comedy sketch in our own living room. But it wasn’t funny to me. I was embarrassed. And I *hated* being laughed at.

As soon as I regained control of my limbs, I fled upstairs in a fit of angry tears with their laughter ringing in my ears, locking myself away in my room. My parents must have felt sorry for me and may have regretted their amusement at my expense; they never made me clean the mess. Still, to this day I have never been able to bring myself to join them in seeing the humor of the situation. I was kid. I was *good* kid. Breaking the rules was a very big deal to me. Even though my dad was simply teaching me a lesson in his own silly way, the embarrassment I felt at being caught doing something I wasn’t supposed to do, was the worst kind of punishment.

“ABNER!” I still hear that danged word in my father’s gleeful screech ringing in my head from time to time, and even if just slightly, my body tenses up as though I’ve been caught doing something wrong.

When I returned home from London after the accident, my dad’s jokes didn’t stop. If I bumped into a wall as I hobbled through the house, he would guffaw and say something like, “You can’t even walk straight. It’s no wonder you managed to fall off of a roof.” In a weird twist, I welcomed the jokes as they made returning home and facing my dad a bit easier and more comfortable. Things were the same as always. His jokes helped me temporarily feel like those weeks in a British hospital never happened. For a quick moment I could imagine that I was just home for a holiday break.

Dad’s job allowed him the opportunity to work from home, so he, rather than Mom, was my caregiver for the three months I was stuck in bed after my back surgery. Even though, in my mind, he had never behaved particularly “fatherly” before, I could tell it pained him that he had not been able to come to London. Back in Cincinnati, Dad went out of his way to make sure my bedroom was appropriately staged for my return.

All the while, lying in that London hospital ward, I looked forward to the comfort and familiarity of my own childhood bed, but when I did arrive home, my room wasn’t my room. What I walked into was a hospital room that had been transported into my parents’ house. Dad had rented a hospital bed, and right next to the bed was his proud display of a ready-to-use shower chair and a bedpan. *A bedpan. Really?*

Not allowed to move on my own, I lay propped up at a 45-degree angle for 12 weeks on that hospital bed. I never told my dad, but I despised that concrete hard, mechanical cot. It wasn't just a visual reminder of my endless days in the hospital, it also smelled like latex and bleach. Almost every night as I tried to fall asleep sitting upright, I would smother my face with my pillows to drown out the stink.

Thankfully the shower chair didn't need much use. I could get away with showering just once a week. But the bedpan. Well, the bedpan couldn't be avoided. A part of my recovery involved staying hydrated, so I had to drink tons of water to prevent dehydration. Under the circumstances, I almost missed having a catheter; it would have been way less embarrassing than having to call my dad to run upstairs every time I needed him to help me "go to the bathroom."

After calling Dad on his home office phone, I would listen closely for his footsteps. I tried preparing myself as much as I could, given my limited mobility, so that all he needed to do was lightly roll me over on my side, slide the bed pan under me, then roll me back over it so I could do my business. We refined a routine pretty quickly, and I tried to tell myself the whole scene was just like a masseuse waiting for his client to roll over from belly to back. Dad immediately turned his head to look out a window, and he'd politely hold a sheet over me as I rolled each way. But there was nothing we could do to mask the awkward sounds when I finally relieved myself. It was a lesson in humility for both of us. We never looked each other in the eye during these moments or talked about how uncomfortable the situation was. And I'm thankful he knew this was one thing not to joke about.

I can't say after those three months of bed rest that Dad and I spoke more or hung around together any more than before my accident. But something *did* change after those three months. My dad took care of me in a way I hadn't experienced or couldn't remember experiencing as a

child. Sure, I was way more than annoyed that there I was, 20 years old and dependent on the help of my parents for *everything*. But even during those embarrassing bedpan moments, I saw something different in him. In those moments, I was my father's baby girl. Dad was caring for me, and he was trying to keep the physical pain at bay and relieve the discomfort I was feeling. He was my support system. He was the father I thought all fathers were supposed to be. He was my movie dad. I saw Randy Stroufe with new eyes after that.

New Sights

At the end of January, my 12-week prison sentence was up, and I finally felt some semblance of the independence I'd had just a few months prior. Although I didn't return to UNC for the Spring Semester, I enrolled in two online courses to keep my mind employed and stay on track to graduate on time. In March, I even decided to work part time at the job I'd held during high school, a local jewelry store. Working behind a counter required hours of standing, which worried my parents, but I didn't hear any of their concerns. I wanted to be out of the house and among the living. Day-time mall shoppers pushing strollers created a welcome and necessary distraction. I was young after all. A quick healer. *That's what the neurosurgeon said, wasn't it?*

In addition to the job and homework, I also went to physical therapy, which was another welcome excuse to leave the house. Surprisingly, the physical therapy had nothing to do with my back surgery. Apparently three months of bed rest for a young person was recovery enough for that. My physical therapy was instead intended to help me regain motion in my left elbow. I had departed from London with a cast around my elbow, keeping my arm stuck in a 90-degree angle for a little over a month. Since I didn't have any remaining pain in my elbow, I wasn't too concerned about seeing an orthopedist in Cincinnati. Instead, I went to my general practitioner for his opinion, and while he didn't see a need for surgery, it was clear I needed some help achieving a full range of motion.

Physical therapy was a 3-day-a-week commitment. I was determined to get that full motion back, even if it meant pushing my pain limits to the max during my 60-minute sessions. Extension came back quickly. *180-degrees. Arm straight out. Success.* But I wasn't able to *bend* my arm fully anymore. When I tried to touch my left shoulder with my hand, it was as if there

was a doorstop wedged in my elbow that prohibited my bent arm from closing and touching my shoulder.

By March, I was frustrated. I began to question my doctor's decision not to operate. A close family friend recommended I see a well-known orthopedic surgeon—Dr. Warner—for a second opinion. Dr. Warner was young, in his early forties. Traditionally handsome with light brown hair and friendly green eyes, Dr. Warner came across as an older version of an All Star Athlete. I liked him.

Mom went with me to my first appointment with Dr. Warner, and by the end of it, I had X-Rays, a CT scan, and a tentative surgery date. During the appointment, Dr. Warner explained that scar tissue had formed around my humerus bone and that was preventing my elbow from bending completely. In an uncomplicated, spiritless tone, he indicated mobility would be returned after he removed the scar tissue. With his index finger, he traced on my arm where the one-inch incision would appear. *No big deal.*

I spent the weeks leading to surgery immersed in homework and work. While others may have taken this opportunity to seek a second opinion, I felt confident and relieved. Dr. Warner provided me with a reasonable explanation and a solution to my problem. Once the surgery was complete, I would return to college for my senior year. And I would be returning to the independence and mobility I deeply desired.

When I arrived at the hospital on April 16, 2010, I felt certain a quick recovery would follow. Mom drove me to the hospital for the 6 a.m. check-in; Dad planned to arrive shortly thereafter. After completing the required paperwork, Mom and I were led into a pre-op room

where a nurse connected me to an IV containing anesthesia. This time the dreaded IV process went relatively smoothly; I was relieved. Dr. Warner then came in for the standard pre-op consultation. Mom stood to my left as Dr. Warner marked my elbow with a blue pen to map the surgery incisions. Right away, I noticed more markings on my arm than I had expected for what I understood to be a simple surgery. Dr. Warner studied my arm closely, and although he didn't look up to see both my and my mom's quizzical faces, he went straight into detailing a surgery that we had not heard about until that moment.

“After reviewing the CT scans, it's clear the bone needs extra support. We'll be removing as much scar tissue as we can, and we'll be supporting the elbow with two plates on each side of your elbow. No need to be concerned though, the scar will be only about an inch or two. The plates will help support the bone that has weakened over time. You'll be ready to start physical therapy again two weeks post-surgery.”

Plates? Why am I just now hearing about this? I don't understand. The confusion I felt didn't last for too long though because right after the 10-minute consultation, the anesthesia hit me hard and I was out for the next three hours.

When I woke up in recovery, I had one of those awful headaches you get when you've slept too much. My head felt cemented to the pillow, and it was all I could do to turn my head to my left. There was a stranger in the room—I gathered a nurse—and I managed to speak in a raspy voice that sounded strange to my ears.

“I can't feel my arm.”

As my vision began to clear, so did the nurse's appearance. She wasn't tall and she wasn't short. She had brown hair tied up in a bun and was dressed in pink floral scrubs. When she heard my almost-whisper, she turned right to me, walked over and reassured me it was normal. "You're just waking up from surgery; you'll be a little groggy for a while."

Although still woozy and weak, my voice now sounded familiar to my ears. I clinched my teeth and mustered the same stern, loud tone I had used months prior when telling the London nurses not to touch me. I couldn't feel my left arm, and I knew that wasn't normal.

"No, I *can't* feel my arm. WHY CAN'T I FEEL MY ARM?"

She stepped back from me about half a foot, taken off guard by the difference in my volume level. She explained that in preparation for surgery, I was given a nerve block, which prevented all feeling in my arm for up to 2 hours after surgery. I understood the need for a nerve block, but I felt unsettled. Prior to surgery, why didn't someone prepare me that I wouldn't feel my arm? I looked at my arm and it was wrapped in thick dressing with only the fingers of my hands exposed. I didn't have words to explain to the nurse that I *knew* something was wrong, something unrelated to the nerve block.

"Just try and get some rest, dear. We'll keep checking in on you, and Dr. Warner will be in to see you in a few hours. We'll send your parents in to see you soon."

Those next few hours felt like a torturous waiting game. My parents arrived but couldn't comfort me. I became obsessed with the clock on the wall, counting every minute that passed. I couldn't rest. I was scared. *This is not going as I planned.* And I was really, *really* hungry.

When the nurse came back, almost two hours later, she asked me how I felt.

"I can't feel my arm."

"Hmm. Let me go get Dr. Warner and he can take a look," she said.

About 30 minutes passed, and I was almost convinced the nurse had forgotten about me when she eventually returned. But she was not with Dr. Warner. A much older gentleman wearing a suit under his open white lab coat preceded her into the room and introduced himself as the Chief of Orthopedic Surgery. He walked to my bedside and gently moved my heavily-gauzed arm. He held my hand, lifted, and released. My hand dropped freely at the wrist.

My parents and I concentrated on the doctor, our eyes shifting from the doctor to my arm and the dropped wrist. Taking my fingers, one by one, he asked if I could feel him touching. I watched his lips purse tightly, if only for a split second, when I responded that I couldn't feel him touching me. After a few minutes, he left my room. No discussion.

As if to explain the silence, the nurse said, "Dr. Warner will be in shortly."

When Dr. Warner walked into the room, he examined my arm in the same way the older doctor had. He didn't look at my face or speak directly to me.

Instead, he spoke to my dead arm. "We'll be performing an exploratory surgery in the morning." Then he walked out of the room, leaving the nurse to answer the many questions we had.

I reached for my parents with my right hand, not quite sure who was closest, but I needed to feel someone holding my hand tightly. I needed to grip onto something. I found my way to my dad's hand. Not wasting a second, my mom followed Dr. Warner into the hallway.

"Excuse me, can you please share a little more *detail* on the exploratory surgery? What's going on?"

Dad and I could hear the conversation taking place outside my room.

Initially, Dr. Warner stumbled over words. “We believe one of the plates may be impinging a nerve. We will open the incision, and if this is the case, we will reposition the nerve.”

“And what about her feeling?”

“The nerve will heal in a few months. Excuse me.”

Dr. Warner walked away and Mom re-entered my recovery room. Dad was still holding my right hand, and I looked at mom anxiously. Mom walked over to me, put her hand on top of Dad’s, and we three stayed in that position for a few moments. To be honest, I felt so exhausted at that moment that I didn’t want to face reality, the possibility that something had gone wrong. In my mind, I wanted to believe this was the last hurdle. I closed my eyes.

Another surgery in the morning. Another night in another hospital. The routine felt far too familiar, and yet the only feeling I could really 100% comprehend that evening was *I’m hungry*. I was *so* hungry. I hadn’t eaten for 12 hours prior to that morning’s surgery, and given the diagnosis of a second surgery the next morning, it’d be a total of about 36 hours before I was able to eat anything. *Damn, was I hungry*.

After my parents left that night, a new set of nurses came in and moved my bed from the recovery room to a much nicer hospital room, one reserved for those staying overnight. As it seemed with everything at that hospital, it took them a while to prepare a room for me. I was only supposed to be an outpatient, after all. But once they finally moved me into my own permanent room for the following two days, I passed out almost immediately. It may have been purely from exhaustion, but maybe it was also because I wanted to avoid the loneliness that comes on so quickly in hospitals. Sleep was my escape. It’s the only thing you have to help clear your mind while stuck in a hospital.

Exploratory surgery the following day revealed an entrapped radial nerve. The nerve wasn't completely severed. Dr. Warner indicated it could take four to six months for movement and feeling to return. Four to six months. Four to six months. *Four to six months?* In the days, weeks, and months that followed, that was all I could recall hearing

Returning home without feeling in my arm meant I had to find a new way to type my remaining online class assignments. I had informed my professors of my surgery, and I had been granted extra time. When I reported that I could now type with only one hand, they were even more accommodating. I could no longer escape to a part-time job, so homework became my obsession. It was incredibly slow going, but the reading and typing gave me something to focus on.

I had an appointment to see Dr. Warner two weeks post-surgery. I still didn't understand what had gone wrong with the initial surgery. I didn't understand why he didn't fully explain the follow-up surgery. I didn't understand how the nerve had gotten entrapped. I was nervous. Although the appointment was to remove the surgical wrappings and check on my progress, the appointment held a much deeper purpose for me. I had no feeling or movement in my arm. I was hopeful Dr. Warner could give me a more specific recovery timeline. I wanted him to tell me when I could return to college and classes and a normal life.

Dealing with doctors was Mom's job throughout most of my recovery. And really, most of my life. For my first post-surgery appointment with Dr. Warner, though, Dad insisted on driving me to the appointment. We didn't have to wait long before we were called into an examination room. Within a few minutes, Dr. Warner entered the room with a nurse. I sensed there was an active attempt to get us in and out as quickly as possible.

The small examination room consisted of an examination table and one chair. I automatically sat on the table thinking that's where I'd be while Dr. Warner changed my surgery dressings, but when he came in, he asked me to sit in the chair. When I sat down, the room seemed to grow larger. In that chair, I felt like Alice after she swallowed the shrinking pill.

Dad stood to my right, his 5'8" stature now towering over me and placed his hand on my shoulder. Dr. Warner, towering over Dad, stood to my left with his nurse Carolyn, who was adjusting a lamp to ensure quality lighting while Dr. Warner inspected my incision. No one talked during the first few minutes, aside from Dr. Warner muttering a few things to the nurse. All I could focus on was the buzzing overhead fluorescent light and Dad's hand on my shoulder, which felt hot and as though it weighed 100 pounds. I could tell he was as tense as I was. His hand, though meant to be comforting, was actually channeling his built up frustrations with Dr. Warner.

As Dr. Warner slowly un-wrapped my bandages, I started to feel light-headed and began to sway slightly. All of the blood rushed from my head and I thought I was going to fall out of the metal chair onto the cold, linoleum floor. Originally looking forward, I turned my head towards Dad and tried to focus as hard as I could on an outlet I saw close to the floor. Dad's grip tightened and he reminded me to breathe. With one deep breath, my body stopped swaying, but my eyes remained glued to that outlet. I did not dare look to my left.

The gradual, careful removal of the thick bandages around my arm seemed to last eons, but Dr. Warner inspected and re-dressed my arm fairly quickly. I could feel the pressure of his hands while he blotted my incision with medication, and I knew the incision was likely very tender, but any pain was literally lost on me. When the new, lighter ace bandage was completely

wrapped around my arm, Carolyn lightly patted the incision with cleaning solution and then dried my arm off. “All done!” she exclaimed cheerfully.

I waited a few seconds, and then with one long drawn out breath, in and out, I turned my head, first forward, then to my right to face Carolyn and Dr. Warner. I should have looked up then left, away from my injured arm, and maybe even moved my whole body rather than just my head, but instead, my head panned straight to the left, like a panoramic film camera, and I was greeted by an unexpected and an unnerving sight at the end. I had been so focused on the outlet and my breathing that I didn't realize Dr. Warner had grabbed a hand mirror and was holding it so that I could see the back of my arm.

What I saw was an impossibly long incision and about 50 staples stuck in my flesh, lined up like train tracks stretching from forearm more than a foot, all the way up the back of my upper arm.

“The incision is young and very pink now, but it will fade as it heals and matures.”

PINK?? I don't care about the PINKNESS. The thing is practically as long as my arm. It's SO long. I had no idea it would be so long. It's 12-inches AT LEAST. I thought it was only supposed to be a FEW inches.

Dr. Warner kept holding the mirror and I kept staring. Tears ran down my face as I sat silent, unable to break my stare or move my gaze away from my scar. *My* scar. That long scar had been on my body for two weeks and I had *no idea*. It was ugly and long and wide, it would be mine forever, and it would be out there for the world to see.

What started out as stream of tears turned into a full on waterfall. Until that point, I must have been holding my breath. But as I tried to fill my lungs with the much needed air, breathing loudly in and out of both my mouth and nose, I could only gasp, short and shallow gulps. My

defeated body slumped forward into what can only be called a C-shape and shook ferociously as I completely lost my composure, forcing Dad's hand to drop from my shoulder. Dr. Warner lowered the mirror. I apologized for my lack of composure. I mentally kick myself for that now. I actually *apologized to him*.

Genuinely surprised by my reaction, Dr. Warner asked me, "What's wrong?"

Still hunched over, my crying intensified once more. I covered my face with my right arm, trying to keep the tears from blurring my vision. I couldn't see anything but the blurry floor between my fingers.

"Whad'ya mean 'What's wrong?'" Dad snapped forcefully. "Her scar is *HUGE!*" He hadn't said anything during the whole appointment until that moment.

"Oh. Yes. When we did the exploratory surgery, we had to open up the incision further up her arm to find the point of nerve impingement." Dr. Warner fumbled over these words and spoke in a much more assured tone than he had during my first appointment with him.

"Why weren't we told how big the incision was? She didn't know it would be that long." I still hadn't looked up and couldn't see him, but I knew Dad was getting really mad. His Eastern Ohio country accent came out as it always did when he got riled up.

Honestly, I didn't hear much more of what Dr. Warner and Dad said to each other over my sobbing. *Breathe in. Breathe out. Breathe Brooke. Breathe.* Once I reminded myself to breathe and managed to take a few massive breaths, I stopped shaking. The tears stopped and, in an odd way, I felt calm. I looked up at Dad on my right. His fists were clenched so tight that his dark knuckles were white. His chest was wide and he was leaning forward. Dad seemed to have grown even larger while I was sitting in the chair. In that moment, I knew he was my protector.

I turned to Dr. Warner and could see that he was uncomfortable. Though a much taller and wider man than my dad, he scooted away towards the door, visibly diminished.

“Carolyn will finish up with the new dressings and will give you the supplies you need to replace them at home. Every three days should be fine,” he said rapid fire over his shoulder as he fled from the room, not staying around to answer Dad’s or my remaining questions.

Dr. Warner left poor nurse Carolyn to mop up his mess and deal with the awkward tension in the room. She smiled at me, and in her eyes I could see sympathy. She didn’t apologize for Dr. Warner, but I think she wanted to. She wrapped my arm in a lighter wrap than I’d had post-surgery, and as she packed a “goodie bag” with additional wrappings that I could change at home, Dad tried to calm himself. He was focusing on his own breathing, and while his fists were still clenched, they were noticeably less tense. He had returned to his normal size. Carolyn explained that I should return to physical therapy in another week or so to ensure the therapist kept up with movement exercises. She stayed in the room, but as Dad and I walked into the hallway, she reached her arm out, pointing us to the checkout desk as she bid her goodbye.

Dad’s fists finally released as we walked towards the exit. He looked at me and said, “I could’a punched him in the face. What an asshole.” His voice still louder than normal and shaky. My dad is a jokester, and throws around curse words regularly, but I’d never heard him call someone an asshole and actually mean it. He was mad and had held back his anger physically, but he didn’t know how to make the situation right. As we walked out of the hospital, both of us shaken up, he did the one thing he could do: he reached out and held my right hand. It was at that moment, our fingers entwined, me drawing strength from his strength, love from his love, when I realized, once again, that he was there for me in the way I always wanted him to be. And perhaps he always had been.



Post-surgery, Cincinnati 2010

Goodbye

I never saw Dr. Warner again. In the weeks after Dad and I left that post-op appointment, we talked to a few lawyers to see if some sort of compensation was possible for the mistakes that were made, the resulting 15 inch scar, and the physical and emotional toll. After all, wasn't it Dr. Warner's fault that the plates he put in were too large? He had *x-rays*. He had *CT scans*. Hell, couldn't his own eyes tell him that I have tiny bones? Surely we could sue him on some grounds. But Dr. Warner was a surgeon at a university hospital. He was an employee of the state of Ohio, and medical malpractice cases—always extremely hard to win—are even harder when you're up against a state employee. The case goes straight to a judge, and the verdict is almost never in favor of the patient. One of our closest family friends—a lawyer specializing in settlements—told us frankly that it just wasn't worth it.

Looking back, I now realize that was probably the best advice I could have gotten. Pursuing the case would have more likely caused more emotional harm than it would have helped me heal. I would have had to keep living through and with the situation, re-living the trauma of it with little hope of a positive result. Yes, it was better to try and move past it and focus on the future, the day I would regain feeling and mobility. If I didn't have feeling after six months, I decided, then that would be the time to reconsider.

So I continued occupational therapy, as directed, but my weekly sessions became more of an exercise in patience than progress. My brain would tell my arm to move, it would tell my fingers to wiggle, my wrist to flick. But nothing happened. My left arm was neurologically disconnected from the rest of my body. It was eerie to stare at my lifeless arm, begging for some sign of movement. Without control over my left arm, my sessions were entirely led and controlled by the Therapist.

Kelly was my constant coach since I first returned home from London. She was in her late 30's, with long, curly red hair. She was soft-spoken and loved talking about her teenage daughter. In many ways she reminded me of my mom. Though her voice was sweet and she was no taller than 5 feet, she pushed my arm like a wrestler during our therapy sessions. My appointments would begin with my lying horizontal on a cushioned examination table while Kelly slowly unwrapped the ace bandage I wore around my incision. Kelly would then administer a therapeutic ultrasound all around my elbow to increase blood flow; this helped the tissue to heal. She would massage my muscles with warm lotion and manually stretch out my arm.

Since I could still feel some pressure in my upper arm, I was able to feel the warmth of the ultrasound as Kelly massaged above and below my elbow. The warmth reassured me, even just slightly, that one day I'd be able to feel warmth all the way down my arm. While Kelly literally walked me through all of the exercises she did with my arm later in the appointment, during those first 15 minutes of stretching, she'd stay quiet. I liked to close my eyes, getting lost in the warmth. The circling motion of the ultrasound tool was meditative. The repetition and routine at the beginning of every therapy session felt normal. And how I longed to feel some normalcy.

I've always been a determined person. In second grade, I tried to learn sign language so I could talk to a deaf student in our class whom no one else seemed to want to befriend. In fourth grade, I wanted to read faster than anyone in my class. Even if that meant getting a "C" on the reading comprehension questions that followed. When I started running track in sixth grade, I sought to be the fastest sprinter and longest jumper in my events. Fast forward to high school, while my brother was constantly grounded for bad grades, I was determined to take AP classes

and make a 4.0 GPA. During my junior year of high school, when my brother dropped out of college, I set my mind on attending a top university. By spring break of my senior year, all of my friends were in the top 10% of our class and I accepted my admittance to Tufts University, priding myself on getting into a top tier school. It was the name and the prestige that was important to me in deciding to go to Tufts, and after just two months, I knew I hated being there. By December, I'd applied to transfer, and by the following March, I was accepted into UNC as a transfer student.

During my first two years of college, I was determined to be an economics major and get a job in international business after graduation. Even though I was complete rubbish at macroeconomics and had no idea what international business even meant. But economics was supposed to lead to the most successful career, and international business meant travel. Proctor and Gamble's headquarters is in Cincinnati, and growing up with children of international execs at P&G drove me to want that international lifestyle that I was convinced was high class and cosmopolitan. After my mom took me on a trip to London in high school, I fell in love with British culture and knew I wanted to study abroad in London during college. By the end of my sophomore year at UNC, I'd already started to have doubts about my major, but I enrolled in the British Economics track of the study abroad program. I left for London in August 2009, excited by the image of myself in such a diverse, major international city.

Though my accident derailed my plans for a short time, and despite the fact that I was consumed in shame at losing my self-control and guilt for all of the financial pressure I placed on my parents, I was still determined to achieve that successful, well-educated, well-traveled, power business woman ideal self. It was what I thought I was supposed to be. In that goal-oriented mode, I no longer found it much use to be angry with Dr. Warner. Anger didn't numb my pain, it

distracted me from my self-guilt. And it started to feel like a superficial way to cope with everything that had happened to me. Instead, during my physical therapy, I became determined to achieve the one thing my body was telling me I couldn't do. I was determined to get back as much movement in my arm as possible, even though it would be a few months before the nerves would regrow and I would have feeling again. I couldn't take back my accident. I couldn't take back my surgeries. And as much as my brain willed my wrist to lift, it just wouldn't. I had no control, and oddly enough, physical therapy session gave me the clarity on my situation that I needed to move forward with the healing process.

Like my anger toward Dr. Warner, my determination to focus on the physical recovery helped me ignore and delay the inevitable focus on my emotional recovery. It was great that I was so driven to achieve movement, but I held on to a misguided ideal of what determined and defined success. I was still consumed by the idea that I needed to graduate on time because, in my fantasy of perfection, I would be a failure otherwise. I wanted to have the same end result as my high school friends who were excelling at their Ivy League schools. So while I'd accepted my physical condition and made progress dealing with my physical limitations, I still desperately needed to focus my attention on healing mentally and emotionally. I just didn't realize it at the time.

At the end of April, I decided I was going to return to North Carolina in June for summer classes. I didn't know how I would handle carrying my books to class or how I would type papers, or how I'd even drive myself to the grocery store off campus and then prepare my meals. But I was going back and there was no turning back. I spent May planning my return; I found a new orthopedic surgeon in Durham—Dr. Ruch—who I planned to see while at school. I found an off campus apartment that was close to a grocery store, and I emailed my professors letting

them know my physical situation, emphasizing I still planned to submit assignments on time. Some way, somehow.

During the first week of June, just before I left Cincinnati for North Carolina, I had my last physical therapy session. During the appointment with Kelly, we went through the motions as usual. I told her about my upcoming drive to North Carolina as she held out my left arm, stretching and pulling it away from my body. I was mid-sentence when Kelly interrupted me:

“OH!! Brooke!” she said, her voice rising, “Brooke, your fingers! Your fingers moved!”

My head shot up from the pillow on which I’d been resting, and I strained my neck to look at my out-stretched arm. Kelly was supporting my forearm, and I still had a brace around my wrist to prevent it from drooping, but when I looked at my fingers, I saw the little bit of life in them that Kelly noticed. My ring finger and my middle finger were moving up and down, and while it was barely a centimeter each way, it was still movement. I tried focusing harder on telling my hand to move, and to my surprise, my pointer finger wiggled ever so slightly alongside my ring and pointer fingers.

Over the previous months since the accident, I’d cried bucket loads of tears over my injuries, but this time, as tears welled up in my eyes, they didn’t stream down my face in anger or shame. Instead, as my nose tingled and burned, and my chest fluttered, I was filled, not with grief but with complete joy. It had been a month and a half since I’d seen any sort of life in my left arm. I stared at my hand, studying the tiny movement in three of my fingers. *I am going to be okay.* In that moment, I crossed through to the other side of some horrible part of my trauma and the resulting shock, disbelief, and blame. I finally trusted that, with time, I would heal.

Nerve regeneration is an extraordinary thing, and it’s not without pain. Over the next three months, I continued to work with Kelly and the ability to wiggle my fingers continued to

improve. First, I gained movement in my thumb, and by mid-July, I was able to lift my wrist a centimeter or two. Along with the return of functionality and movement came the return of feeling, and when nerves heal, there are often brief spasms of pain, which I experienced almost like an electrical shock. These shocks—usually in my hand—stunned me, and as the nerves continued to heal, I’d often literally jump in surprise. But every little shock was nothing less than a blessing, a reminder that the worst of the healing was behind me.

By the time other students began returning to UNC for fall classes in late August, I had regained all my feeling in my hand and arm, and I was able to control my movements again. I was ready to run fast and hard into the last stretch of my recovery. I was ready to pick up where I’d left off academically, and reach the finish line walking into graduation with cap and gown standing next to my friends as I’d always planned.

Over the summer, I’d taken two classes, both in the anthropology department to fulfill a few remaining general education requirements. I’d taken anthropology classes before in order to fulfill other requirements, and while I enjoyed them, anthropology did not fit my idea, at the time, of a “successful” major. But the two summer classes I took—Cultural Anthropology and Art, Myth, and Nature—completely changed my perspective. The ideas of the collective unconscious, various myths of nature and creation, the role of community in identity formation, among many others, fascinated me and resonated with my understanding of myself both before and after my accident. Those two classes confirmed what I previously didn’t want to admit—I *hated* economics. The more research I did on those who studied cultural anthropology, the more I realized I could still have a successful career in the social sciences, or certainly a fascinating

and challenging career, and I'd definitely be able to travel internationally. At the end of the summer, I knew I had to follow my new found passion.

I had to take the maximum credit hours both semesters of my senior year to graduate on time and still fulfill the requirements of my newly declared major—Anthropology. But after the shit storm of a year I'd just had survived, I didn't doubt my ability get through six classes each semester. The illusion I had about success, and the fantasy that I was invincible was caput. My life was no longer based on the drive for perfection (or what I thought perfection meant). I could finally admit to myself that I couldn't avoid trouble or mistakes through sheer determination. And reality taught me that no one is immune from life's sudden and sometimes painful twists and turns. I felt empowered. I had made it through something really, really difficult, the hardest obstacle I'd ever faced, possibly the hardest I would ever face, and I hadn't given up; I'd made it to the other side. I had new kind of confidence now. I was certain I could tackle whatever challenge came next.

To graduate in May meant late nights studying and working vigorously on the weekends to keep up with my assignments. The fall semester was particularly challenging. I was thrilled to reunite with my college friends, and while I did not reconnect with all of the people I had been in close touch with before my accident, my closest friends welcomed me back with enthusiasm. I spent my birthday that September surrounded by my closest girlfriends, catching up on all the juicy stories I'd missed out on, and hearing about their summer internships. They asked me questions about my summer and recovery in non-judgmental ways, and it felt so good to be honest with them about the challenges—that is, after I was finally able to admit them to myself.

Just knowing my best friends were a phone call and a five-minute drive away was enough to make me feel like I was in the right place again.

However, I didn't let the excitement of the college social life, especially with all my friends now 21 years old, make me lose sight of what I'd overcome or what I needed to do to graduate with my friends. While I was hardworking before my accident, I had also highly valued (too highly) meeting new people and being liked by everyone, which often meant going to parties and drinking too much to cope with the uncomfortable reality that I don't actually love being around large groups of people that I don't know. I had had the illusion that to be successful not only meant having a good job, but also that I needed to be a sociable people person. Now, I never hesitated to turn down plans on the weekend to work on a paper. I had a stronger sense of what I wanted to do with my time and actually acted on it rather than doing what I thought others wanted me to do. This was definitely a change from my former self.

Despite the progress I made overcoming the physical and emotional repercussions of my accident, I still refused to show the world what was underneath the 12-inches of surgical tape on my arm. I don't quite know why I thought flesh colored surgical tape that extended down the length of my arm was less obvious than the scar itself, but the last thing I wanted was the world to see the young, pink scar that branded me, and then to ask me about it. That scar announced to the world I had a story to tell, but only a year after my accident, I was not ready to tell it. Not yet. What I didn't expect during my last year at UNC, let alone my first semester back, was dating. I had only one romantic relationship in high school and that ended during my freshman year of college. Sure, I had been interested in a few boys during my sophomore year, but the feelings were never quite reciprocated. I was twenty-one years old, but outside of my high school boyfriend, who I didn't start dating until I was seventeen, my experience with guys had been that

they were just not interested in dating me. And in high school that was okay; I could focus on homework and sports and hanging out with my group of girlfriends without any added pressure of a boy. But in college I started to think the lack of interest was directly related to my appearance. I loved North Carolina, but the student body at UNC was, superficially at least, pretty homogenous, with blonde-hair and blue-eyes feeling like the traits boys most looked for in a girlfriend. Already convinced my ethnically ambiguous appearance was a rare, acquired taste at UNC, and now with a fresh new scar trailing down my left arm, I didn't have much hope for dating during my last year.

I consciously avoided social situations in which I knew there would be large crowds. I was still getting used to being around people who weren't my immediate family, so when I did go out on weekends, it was usually with a handful of good friends to grab a drink. Then, on October 8, 2010, I decided to go to a birthday party for a friend. I knew there would be at least 30 people attending, but the party was within walking distance from my apartment. I assured myself I could easily leave at any time if I felt too uncomfortable.

Shortly after arriving, a very tall, well-dressed, and incredibly handsome guy caught my eye. We made eye contact and smiled at each other as if actors in a romantic comedy. The handsome man ended his conversation and walked right up to me.

“Hi, I'm Niklas.”

Niklas was 6'3" with brown hair and bright blue eyes. He was slender but had broad shoulders, and, despite his height, he had an inviting boyish face. Although I didn't notice his accent when he introduced himself, he soon explained that he was a study abroad student from Sweden.

Niklas and I hung around each other for the remainder of the night standing in a hallway with our heads closely together as we spoke animatedly about his study abroad experience and our shared love of Boston. We had both lived outside of Boston for a short time—me during my days at Tufts, and he during his gap year as a nanny—and we both missed the diverse food and people, but not the cold weather. The whole time we spoke, I was completely in awe that such an attractive man had not only smiled at me, but actually approached me and wanted to talk to me when there were dozens of other girls in the room. Not once did I think about my scar while we were talking, despite the fact that it was a typical muggy October evening in North Carolina, and I was wearing a short sleeve shirt that revealed the bottom half of my surgical tape.

When I headed home that night, Niklas texted me to say what a pleasure it was to meet me. I was flattered but figured nothing serious would come of it. After all, he was returning to Sweden in three months. Still, meeting Niklas lit a fire in my chest. I decided I would try and pursue, in the time we had, whatever it was that could blossom in the budding relationship.

For the rest of October, our schedules kept us from seeing each other, but we communicated every day, sharing stories of our pasts and finding more and more common interests. One day while we were chatting on the phone, he brought up the question I'd been anticipating but anxiously trying to avoid. He asked me about the tape I had on my arm the night we met. I hesitated for a few moments. My heart raced. I needed a few moments to think. Up to that point, if someone unfamiliar with my story asked about the tape, I'd just say, "I took a bad fall and had to have plates implanted." But with Niklas, I took a chance and told him my story and described the battle scar hidden under the tape.

"Wow," he said, and added in his thick Swedish accent, "You are a badass for getting through that." To my surprise, it seemed an almost comical moment, and I smiled.

When our schedules finally allowed time together, we became close companions. Almost every day, Niklas would tell me how beautiful I was. He knew I was self-conscious about my scar, and he tried tirelessly to convince me not to wear the tape to hide it. Although I didn't stop concealing the scar, I held on tightly to every compliment he offered. In his eyes, I was a "badass" or "so smart" and "very strong." He helped me to feel proud of the progress I had made. Hearing those positive words from someone who hardly knew me made me start to believe my scar maybe wasn't something to be ashamed of. My accident wasn't something to be ashamed of. The accident didn't define me. How I responded to the accident was what made me, *me*.

Saying goodbye to Niklas in December was hard, but we kept in close contact for the remainder of the year, and we would share occasional emails for two more years. His genuineness and positive outlook helped me to see myself differently, made me excited for the upcoming spring semester. I was ready to receive that degree I'd pined for over the last year. My new attitude must have shown. Spring semester started and within two weeks, I ran into one of my new classmates at a bar. Stefan approached me saying he had noticed me the first day of class and had wanted to talk to me. Taken by surprise by his honesty, I accepted his offer to go on a date.

He was on the tennis team and was a Division I athlete, which intrigued me; but, looking back, there was never a very genuine connection between us. I never spoke of Stefan by name when I talked about him to my friends and family. He was always just "Tennis Boy." He wasn't into academics and was barely passing his classes. As I reflect back, I can't think of a single conversation we had in the seven months we dated. I assume most of our discussions were about tennis. While I was still in close written contact with Niklas, I had gotten used to hearing his

compliments about my personality and about my appearance, and Stefan helped fill that void. Niklas helped boost my confidence, but I started to crave that positive attention, I thought dating a star athlete at UNC made me more attractive. If *two* guys were interested in me despite my scar, I couldn't be *that* unattractive.

When the end of the semester arrived, I graduated. *On time*. I had my Carolina blue cap and gown, and my family came down to celebrate with me. Mark, Mom, Dad, my grandma, an uncle and two aunts from DC all came for one day to see me accept my diploma and share a special dinner after the ceremony, toasting to my accomplishments and all the crap I'd overcome. I may have been one of those kids you hear about who fell off a roof during spring break or in my case, while studying abroad, but that wasn't the end of my story. I was a college graduate! At a top university! I was much more than my accident.

The truth is, graduation was a pivotal moment, but it was quickly overshadowed by another moment that occurred two months later.

Stefan needed to finish two classes to get his diploma, so he stayed in North Carolina until August. After graduation in May, I stuck around for a few weeks. I had a third surgery on my left arm scheduled at Duke, this one to remove one of the metal plate implants that was causing some irritation. But by Memorial Day weekend, my things were packed and I headed home.

Stefan and I texted and called each other every day through the summer months, and I was excited when August arrived. We had planned a cross-country drive. I flew to North Carolina, and from there, according to our plan, we would drive to Cincinnati for a few days,

staying with my parents, before heading west to California – Stefan’s home. During my first night back in Chapel Hill, we were lounging on the couch watching *Friday Night Lights* on his TV, and I felt at home. I told Stefan I thought I was ready to stop wearing the surgical tape. I was ready to start letting people see the scar. I proposed the idea to him, presented it as more of a question than a proclamation, still a little unsure what I really wanted to do.

“It’s so long and ugly, and it might get sunburned, but I think it’s time I stop wearing this stupid tape. I’m just tired of it. What do you think?”

Never a man of many words or one to provide much insight, his focus remained on the TV as he said, “I mean yeah, it’s kind of ugly, but do what you want.”

Even though I initiated the conversation, I wasn’t prepared to hear *him* say my scar was ugly. My heart froze. My body turned to ice. Of course Stefan didn’t realize the searing depth of the pain his offhand comment caused me. But it wasn’t impossible to imagine that he might have. He didn’t know how deeply it would root in my memory. But he could have.

“Yeah, it’s not pretty,” I said, turning to face him. “But it’s on my body. It’s a part of me.” I spoke forcefully and with growing confidence. “I can’t really get rid of it, so why should I hide it? I think it’s actually kind of badass.”

The swiftness of response and the tone of my voice surprised me. Stefan was startled. Even as I spoke those words, I knew I was not talking just to him. I was talking to myself. I was defending my scar *to myself*. I needed to say those words aloud. I needed to prove to myself that I was truly healed, even if the scar suggested otherwise. That night was the last time I wore my surgical tape.

For three more days I remained in North Carolina to help Stefan move. While we managed to have some fun and hang out with friends, it didn't change things; we both knew it was over. The nine-hour drive to Cincinnati was, well, awkward. Admittedly, it was even worse than the hours spent staring at clocks in the many hospitals I'd been in. We bid our goodbyes soon after arriving in Cincinnati. We never spoke again.



Dad, Mom, Mark, Me, and Jessica holding Jasmine, Christmas Day 2009

Leaving Home

I stayed in Cincinnati through December of 2011 after graduating. I had one last surgery scheduled for November to remove the second plate from my arm. So with the upcoming recovery, I decided not to apply for any jobs immediately post-graduation. After Stefan drove off, leaving me in Cincinnati in August, I felt about ten pounds lighter. The colossal storm cloud that seemed to have floated above me for a year had cleared and the rain that poured down on me had stopped. I had a chance to dry off. At last, I had an opportunity to take a break from planning my future. From the time of my accident through the school year leading up to my graduation, I underwent hours of physical therapy, worked long hours in the university library to finish dozens of papers, and eventually achieved my goal to graduate on time. Now that I had a diploma, I didn't obsess over the paths everyone else was taking—getting a well-paid job, moving to a big city, settling down with their college boyfriend or girlfriend. When I arrived back at my parent's house, I gave myself the break I deserved.

I didn't have a plan for after my surgery, and I was still undecided on whether I wanted to work or go back to graduate school to obtain a PhD in Anthropology. Early in my physical recovery, I came up with a mantra that I'd repeat to myself: *In the grand scheme of my life, this is just a brief moment.* Those words helped me overcome some of my most painful days and weeks. I used this mantra again to justify the break I allowed myself after graduating. In the grand scheme of my life, when would I be able to give myself this much time to just *be*?

In September and October, I began applying to graduate schools—both Master's and PhD programs. I began to research potential jobs I could apply for in January. It was work, but at my own pace and without a clear direction of where I would end up. I found temporary employment as a hostess at an Italian restaurant in downtown Cincinnati. This gave me a chance to socialize

with the few friends I had in who still lived in town. The job also got me out of my parents' house where the tension between my brother and his new family had reached an all-time high, thus causing tremendous friction not just with him, but between my parents.

On weekends, I would meet up with a group of three girls. Catherine was a close friend from high school—one of the “lost girls” I disconnected from during my senior year after the bonfire. She was always a free spirit and an infectiously bubbly girl, and even though we didn't speak during college, rekindling our friendship came easily. It felt like we never stopped talking. I quickly became close with Catherine's friend Violet who had lived down the street from me while we were growing up. Violet's stunning looks and popularity always intimidated me in high school, but in our twenties we clicked instantly and quickly confided our insecurities and secrets with one another. Erika, whom Violet had met at Miami University, which they both attended, had moved to Cincinnati recently, completing our group of four. Erika, like Violet, was very social and seemed to know everyone, but she was also a very intensely engaged student, at the time applying for graduate school for an MS in Nutrition.

The four of us spent pretty much all our free time together on the weekends and even week night evenings when one or all of us just needed to get out of our parents' houses. We quickly bonded over our post-college “*What am I doing with my life?*” phase. Violet, Catherine and I were all living at our parents' houses, and while Erika had her own apartment in Cincinnati, she was recently single and trying to navigate her life after a nasty break up.

We each offered the group something different to help us get through those post-college, post-relationship days, and I think the girls admired my newfound ‘Come What May’ attitude. Even I felt empowered by my new perspective. All three of these friends, each in their own way, helped me to finally realize I wasn't alone. Violet became my confidant; I'd reveal to her my

physical insecurities. It amazed me when she admitted to me her own insecurities about her looks. Catherine, who had left Ohio University after two years, had veered off the straight path I followed for so long, and was enjoying life doing what she loved as a real estate agent and a massage therapist. And Erika's intensity and determination to go to grad school kick-started my own drive to pursue a second degree. These girls could relate to my break up, they could relate to not having secured a dream job, they could relate to being back at home, and I never once had to explain myself to them.

When I had my final surgery in November to remove the last pesky plate, all went according to plan—I was in and out of the hospital within 10 hours, and the recovery was the easiest of any I'd been through. Even the sutures, which I never looked forward to having removed, were easy; they were dissolvable and left no marks. Although the pain quickly subsided, I decided to quit my job as a hostess, a choice I regretted almost immediately. The double shifts that I had been working regularly kept me out of the house during weeknights and away from Mark who was having regular fights with his live-in (as in living in my parents' basement) girlfriend Jessica. The job had kept me away from Jessica's six-year-old son, who also lived with us, sleeping in Mark's old bedroom. And while I loved my (by then) one-year old niece Jazmine, her constant crying drove me nuts.

Jessica's son Khalid slept down the hall from my parents' bedroom and mine. Mark, Jessica, and Jazmine slept in the finished part of the basement; a whole ground floor separating them from the rest of us. They rarely came up to socialize with my parents or me, and even when Mark and Jazmine did join us in the dining room for dinner, Jessica would make a plate for

herself and Khalid, and the two of them would retreat back downstairs to eat in front of the TV in the basement. Occasionally, she would pop her head through the open doorway into the dining room and mutter a “thank you” after piling up her plate, but more often she would just grab and go in silence.

It appeared to me that Jessica didn’t like us very much, but wanted to make the most of her situation. She must have felt as uncomfortable as the rest of us, but I didn’t go out of my way to talk to her or dispel that discomfort because I felt like she was taking advantage of my parents’ kindness and generosity. It’s never been clear to me how Jessica and my brother met or just how long they’d been seeing each other before they had Jazmine—at least nine months, I suppose—but what I did know about their relationship was that it was heated.

Despite the ground floor separating me from the young parents in the basement, Jessica and Mark’s booming fights were audible through the ventilation system. Plus, I could hear Jazmine down there with them, her crying competing with their screaming. Mark knew we could all hear the arguments, or I think he did, but he would still, on occasion, join the three of us for dinner in the dining room. He always looked forlorn after the intense fights, and sometimes he would have scratches on his cheeks or arms, shiny with Neosporin. We suspected where they came from, and asked him about it, but Mark claimed the scratches were caused by Jazmine’s tiny little nails when he held her.

Mom and Dad stopped spending afternoons watching their favorite TV shows in the living room on the ground floor—the fights were too distracting. Instead, they took to locking themselves away in their bedroom on the second floor and at the back of the house, away from any noise below. This was something I was used to with Dad, but was a new routine for Mom. I later learned that behind their bedroom doors, Mom and Dad were having their own fights,

disagreeing on how to handle the constant conflicts happening in the basement. Dad, as always, shied away from confrontation, claiming Mark and Jessica's fights had nothing to do with him. Mom's argument was that the fights were happening under their roof and with their grandchild witnessing everything.

One day, in early January 2012, Mom, Dad, and I were cozied up together on the couch watching old episodes of "The Twilight Zone." We had no idea where Mark and Jessica were, but they weren't home, so we decided to take advantage of the silence in the house and reclaimed the living room space for some family relaxation. At some point, while we were wrapped up in one of the 20-minute episodes, Mark and Jessica came home, entering through the basement door, so we didn't—initially—hear them.

During most episodes of "The Twilight Zone," there are some silent scenes. These are used to build suspense for what will happen next. Mom, Dad, and I were particularly enthralled that evening, anticipating what was to come. When the show went quiet, a loud slamming sound from the basement startled us back into reality. Then we heard another smash that sounded like something hitting a wall or falling very hard onto the floor. After the crashes followed muffled screams, and almost immediately we heard Jazmine crying. Mark and Jessica's raised and angry voices didn't pause for a second at the sound of their child crying.

Mom muted the TV. She and I crept up to the basement door, trying to listen more closely and make out what Mark and Jessica were yelling about. Whenever Mom, Dad, and I were together during the basement fights, Mom and I would threaten to go downstairs and grab Jazmine and take her away from the fighting. No child should have to witness that, we agreed, and no child's screams should be outdone by their own parent's.

Another loud crash.

Mom and I were getting pissed, but Dad just kept sitting in his chair yelling at us to stop eavesdropping.

“Ya’ll need to get away from the door. It ain’t your problem; you need to stay out of it. They’re adults, they’ll figure it out.”

Dad, as always, wanted to avoid any uncomfortable confrontation.

“*DAD*. This is more than just an argument, they’re *throwing* stuff.”

I didn’t feel as though Mom and I should have to defend our listening-in, but I couldn’t believe he was sitting there trying to ignore what was happening.

“Jazmine’s down there screaming and crying—someone needs to go get her. This is bullshit!”

I *very* rarely curse in front of my parents, but my protective instincts kicked in and I wanted to save Jazmine from the potentially violent arguing we were listening to.

Apparently Dad didn’t have the same instinct. He refused to move.

“Well I’m not going down there. They won’t listen to us. This isn’t new. I’m just going to go upstairs so I don’t have to hear it.”

“RANDY. YOU NEED TO GO DOWNSTAIRS AND TELL YOUR SON AND JESSICA TO CUT IT OUT. THEY WILL NOT DO THIS IN OUR HOUSE. GET JAZMINE, AND BRING HER UP HERE.”

Mom’s loud furious tone was scarier than I’d ever heard before from her. I’d never seen her yell at my dad directly before. She’d always been the head of the house, but for the first time, her tone suggested to me that she didn’t always appreciate that that was the way things were. She wanted my dad to take responsibility and go downstairs to break up the fight.

As Mom and I were raising our voices, Dad's stayed at the same even volume. His tone was harder and his words more drawn out.

"I am not going down there. They are adults. It's none of my business."

That did it. I couldn't take Dad's push back anymore. I finally let lose, in that moment, all the years of frustrations I'd felt.

"DAD. THAT IS YOUR SON. THAT IS YOUR GRANDCHILD DOWN THERE. THIS IS YOUR HOUSE. HOW CAN YOU SIT THERE AND SAY IT'S NONE OF YOUR BUSINESS. IT'S YOUR GODDAMN GRANDCHILD. BE A *MAN* AND GO DOWN THERE!"

My angry outburst was almost immediately overcome by giant tears in my eyes and a big ball of anguish in my throat. I could no longer yell, but could muster out quietly, "Why can't you just act like a father for once in your life and go stop the fighting downstairs?"

"Don't give me that 'be a man,' father crap." His voice was now louder and his words came out quickly. "I didn't have a father growing up. I don't know what you expect from me. I do what I know how to do. What more do you want from me?"

"I want you to fight for us. Fight for your son. Fight for your grandchild. Don't let this happen in your own house!"

Overwhelmed with tears, I ran upstairs to my room and slammed the door shut, locking it so not even my mom could come in.

While Dad and I were screaming at each other, Mom had stood frozen, shaking in her fury. After I ran upstairs, I'm not sure what was said between her and Dad, but I know that she ended up going downstairs to the basement, yelling at Mark and Jessica herself and telling them that they better never fight like that in her house again. *And* they should never *ever* fight in front

of their child. She told Jessica to leave. Mark left separately shortly after Jessica, leaving Jazmine to calm down with Mom.

I didn't speak to my dad for days after that fight. I spent the next few nights bouncing between Catherine's place and Erika's. When I was home, I would walk right past Dad if I saw him, and when I sat at the dinner table with my parents, I'd hold a conversation with Mom but not Dad. Dad didn't try hard to speak to me either, so avoiding him was quite easy.

Even though I had no quarrel with my mom, I knew I needed to get away from my parent's house. I decided to go and stay with my Aunt Cheryl and Uncle Brian in Alexandria, VA for the rest of winter and into spring. Since my cousin Channy had left for college in Hawaii a few months prior, this was a plan I'd been considering, but hadn't fully committed to. I didn't have anything lined up there, no job or internship—I would have to figure that out once I arrived—but I packed up my stuff in my car and left just 10 days after the fight with my father.

After I left Cincinnati, the tension between my dad and me dissipated, and we pretty much pretended that our fight had never happened. Things went back to normal between us and, I assumed, between my parents. I never fully moved back to my parents' house after that fight. While in Alexandria, I was hired to be a nanny for a family in Switzerland from June to August, so not only was I able and thrilled to finally have the opportunity to go abroad again, but I was relieved that I didn't have to return home for the summer.

During that same time, I also received acceptances to eight out of the ten graduate programs I had applied to. My final decision came down to choosing between a Media and Communications program at King's College in London and the Masters of Liberal Studies program at Duke. As much as I longed to return to London, going there just didn't feel right. I had come so far, but I was also worried I might try to relive what I'd missed out on the first time

around. I remembered so little about the actual night of my accident that a part of me wondered if there might be some sort of punitive note on my passport file that would prevent me from receiving a UK Visa. While I hadn't gotten my full study abroad experience in London, I also didn't feel as though I was done with my experience in North Carolina. So just five days after I returned home from Switzerland, I once again packed up my car to continue my journey and my story down South.

Reflections

The hardest part about falling thirty feet off a roof in London to the pavement below wasn't the spine surgery or the four elbow surgeries that followed. It wasn't the burning irritation from the catheter or the fact that I looked like a science-experiment, with a drainage tube coming out of a small hole in my back. It wasn't the painkillers that made me vomit with every dose. It wasn't even the suffocating back braces I had to wear. The hardest part about falling thirty feet off of a roof was the self-inflicted conviction of guilt I subjected myself to immediately following my accident.

When I made it home from London, I was relieved that the worst part was behind me (or so I thought), but my relief quickly turned to anger. I was angry with myself for letting this happen. I was living the life I thought I was supposed to live as an economics major studying abroad. I had pride in my work and loved hearing my parents' talk highly of my academic success and sense of adventure to travel abroad. But then I had to go and mess up the wholesome, successful image that I so desperately wanted to project. The illusion of perfection, of being a star daughter was shattered. And it was entirely my own fault. At least that's how I felt at the time.

In one weird twist, I fed my anger during the first few months I was on bed rest by watching the most violent movies I could think of: *300*, *Gladiator*, *Braveheart*, *Lord of the Rings*, *Reservoir Dogs*, and *The Boondock Saints*. Think of any violent, gory movie, and I probably watched it. I never tired of the violence in these movies, just like my dad never seemed to tire of his vintage black-and-white films. When I watched these movies, all I focused on was the conflict and the anger that consumed many of the characters. How could this have happened to *me*? All of those out of control fraternity brothers who lived down the street from me in

college partied on their rooftops all the time. And what happens to them? Absolutely *nothing*. I make one stupid decision--one misstep—and I almost die. I'm marked for life with a 12 inch screaming scar down my left arm and a 10 inch scar down my back as two constant reminders. Only later in my recovery did I realize that most of the main characters in the violent movies I watched were tasked with a journey and obstacles that they swore to overcome. The first time around, though, I didn't see myself relating to the tragic hero at the end of the movie who found peace by overcoming obstacles, I only connected with the pain they felt in the beginning of the movie.

My anger wasn't only directed at myself. I was mad at God. I wanted to scream with rage any time a family member, or even a stranger told me they were praying for me. Growing up, Mom, Dad, Mark and I regularly attended a large non-denominational church. When I was around 11, we started going to a much smaller, predominantly black Methodist church, and even as young as I was, I could tell the messages we were being taught at that church were much more rigid and strict than our previous church. We stopped going after just two years, and though I never truly knew why, I sensed it was because Mom and Dad had their own disagreements with the lessons the pastor was teaching.

After we left the Methodist church, we stopped going to church for the most part. When I was 15, though, I felt a strong desire to start attending church again. After trying out a Catholic church, to which my best friend belonged, I decided I was drawn to a Baptist church that was a few miles down the road from our house. The main appeal, for me, was the breakout sessions for teens. The music was contemporary and fun, the lessons were more relevant to what we were going through, and the church youth staff was fresh out of college and made religion seem cool.

The summer after I started attending the Baptist church, I decided to attend the youth group's summer trip to a spiritual camp down in Florida. Excited about potentially feeling God's presence for the first time at the church, I overcame my nervousness about the fact that I didn't really know any of the other teenagers who were going. But I made it through the long drive, in a van with eight other teens, and I enjoyed myself immensely during the welcome worship service.

By the second full day, however, I started to feel uncomfortable with the lessons we were being taught. "*You shouldn't waste your time dating someone or spending time with friends who haven't found God. They will distract you and corrupt you from your path to righteousness.*" Hearing these words pulled me out of the calm I'd felt from the empowering opening music, and I glanced around at everyone surrounding me, uneasy at the message of exclusion. Many of the people I'd met were nodding their heads vigorously, agreeing with those words. *Shouldn't waste your time. Friends who haven't found God. Corrupt you from your path.* I just couldn't swallow these ideas at the time and couldn't understand how God, who was supposed to love everyone, meant for us to follow such a judgmental and limiting creed. Though I didn't fully abandon God when I returned home, I did decide that I would have to find my own spirituality outside of a church, and I have not been back to one since.

Even though I rejected many of the lessons that were taught at that church camp in high school, the fundamental concepts stayed engrained in my head. *Corrupt you from your path* in particular stuck with me. I believed that being so self-disciplined meant that I was reaching my full potential as a human being. In my mind, to falter from the path I set forth for myself meant I wasn't worthy, but not of God's love—of my own love. So when I found myself bedridden and ashamed of my accident, I was furious that I was my own corrupter, that I had led myself astray.

But I wasn't going to settle with that being the end of the story. If I were my own corrupter, I would also be my own savior and get myself back on track.

I received dozens of "Get Well" cards from every church my grandparents had ever attended, which was several, and classmates I had never even talked to in high school posted on my Facebook that they cried when they heard what happened, they were praying for me to get better soon. At least once a day, the phone would ring, and on the other end of the line was someone who wanted to share his or her prayers with me. Eventually, I asked my dad to screen the calls and tell people I was asleep because I couldn't handle hearing one more person express their sympathies, and I certainly didn't want their prayers.

After three months of bedrest, my eyes did start to get strained by my glowing laptop companion. So I decided to move on to books to pass the time. I had a very short attention span, thanks to the painkillers, so I started with an audiobook of a title I had vaguely remembered from high school: *The Alchemist* by Paulo Coelho. It seemed easy enough to stay focused on, and I didn't have to strain my eyes on the pages of a book.

"The alchemist picked up a book that someone in the caravan had brought. Leafing through the pages, he found a story about Narcissus.

The alchemist knew the legend of Narcissus, a youth who knelt daily beside a lake to contemplate his own beauty. He was so fascinated by himself that, one morning, he fell into the lake and drowned. At the spot where he fell, a flower was born, which was called the narcissus.

But this was not how the author of the book ended the story.

He said that when Narcissus died, the goddesses of the forest appeared and found the lake, which had been fresh water, transformed into a lake of salty tears.

'Why do you weep?' the goddesses asked.

'I weep for Narcissus," the lake replied.

'Ah, it is no surprise that you weep for Narcissus,' they said, 'for though we always pursued him in the forest, you alone could contemplate his beauty close at hand.'

'But... was Narcissus beautiful?' the lake asked.

'Who better than you to know that?' the goddesses asked in wonder. 'After all, it was by your banks that he knelt each day to contemplate himself!'

The lake was silent for some time. Finally, it said:

'I weep for Narcissus, but I never noticed that Narcissus was beautiful. I weep because, each time he knelt beside my banks, I could see, in the depths of his eyes, my own beauty reflected.'

'What a lovely story,' the alchemist thought. "

Within the first two minutes of the story, I was hooked. I felt the pain that the lake felt, no longer able to see any of its own beauty. I had (what felt like) all the time in the world to think about my accident, but all I had succeeded at thus far was recognizing my anger. I looked up at the mirror that was positioned on top of my dresser, directly across the room from my bed, and I saw a 20 year old girl with messed up hair and a sullen face, but eyes that glistened with the desire to know who she was.

I was engrossed in the adventures of the young Santiago as he sought out his personal treasure, his Personal Legend. Santiago faces obstacle after obstacle, but doesn't give in to his fear of failure, a lesson that is stressed throughout the story.

“Tell your heart that the fear of suffering is worse than the suffering itself. And that no heart has ever suffered when it goes in search of its dreams, because every second of the search is a second's encounter with God and with eternity.”

That audiobook was my own personal sermon. I began reading anything I could find about destiny, fate, past lives, and interconnected experiences. Like any lost soul, I was confused about my sense of self and my spirit, and I didn't understand how I had ended up in such a horrible position. But as I listened to the messages in *The Alchemist*, I began to think that maybe I had gotten off track in life, and the Universe was pushing me back towards my own path and desires.

I started thinking for the first time about *who* I was living for. I was always a self-determined and self-disciplined hard worker. But before my fall, I had chosen a college major I hated, I had no passions, and that fateful night in London I had been easily seduced by going out with strangers. I had no idea who I was or who I wanted to become. Clearly what I was doing wasn't working out, and it took a 30-foot fall to give me some *real* perspective.

Life is absurd, and Paulo Coelho's story convinced me that I was going to be the source of my own physical and emotional healing. I had begun a journey, and it was up to me to lead myself towards my heart's desires. At the time, my heart's desires weren't anything more than just getting back to school as soon as possible, but the anger at myself began to dissipate with my new clarity.

When I switched from a major in Economics to Anthropology the summer after my accident and before my senior year at UNC, I set a new path for myself. Just as Santiago realized that his greatest success was not in finding his actual treasure, but in the lessons he learned along

the way, so did I realize that whatever degree I had or job I obtained after school no longer mattered to me. I loved learning about people and cultures, and that was going to be the journey I embarked on. I wanted to feel like a 20-year-old girl, but this time with a better sense of my capabilities, my desires, and my *self*.

Epilogue

Trauma is not ageist. It can happen to anyone at any time. My accident came at a pivotal time in my life—in anyone’s life. At 20 years old, my passage from adolescence into adulthood was literally disrupted. The independence I sought became unachievable. I was lost and full of self-guilt, which at times translated into self-hate. How did I get to that point? How could that have happened to *me*? I was a good kid. I swear. I thought. I questioned. I had forgotten. My intense search for self-understanding and self-actualization that followed my accident was not entirely caused by my accident, but my fall forced me to deal with issues of identity that I had been avoiding and, as a result, I was able to build a new understanding of my world and continue the process of becoming the 25-year-old woman I am today.

I will always carry my scars with me, but in the five years since my accident, I have been on a journey of self-discovery and self-acceptance. My scars no longer define me; in fact, they empower me daily as reminders of what I’ve been through and what I was able to overcome. My physical and emotional recovery allowed me time to search for what I truly want to achieve in this life and over time, and I garnered the courage to follow my passion. Not only did this lead me to the GLS program at Duke, it also led me to my first internship.

In February 2013, I began interning at an advertising technology company. I became a part of the Account Management team and was fortunate to be included in the incentive program the following fall to achieve our revenue goal. The bonus? A trip to London. When we hit our goal in December 2013, excitement warmed my body. I immediately knew that I wanted to return to London in September. I remembered how beautiful the weather was in London in the early autumn months, and I felt if I returned to London in September, it would be symbolic of the journey I’d been on and how far I’d come.

I turned 25 just two days before I embarked on my first return to London since my accident, and my trip ended just one week before the five year anniversary of my fall. My childhood friend Laura accompanied me on the trip, and as we sat in the black cab making our way to the hotel from the airport, my right leg started to bounce and I chewed gnawingly at my tongue. My eyes were glued on the surroundings we passed. When we finally arrived in the London metropolitan area, both my legs were shaking at an impressive speed. The buildings and street names all seemed vaguely familiar as we turned up and down dozens of one-way streets.

I had already planned to spend one of our afternoons walking around South Kensington to show Laura the neighborhood I lived in while I studied abroad. I would give myself a few days to get acclimated and settle into the reality that I was back. Our cabbie, however, sped right down Queen's Gate toward Kensington Gardens, and I was suddenly faced with the sight of my old flat. My stomach felt sick from the immediate shock, but to my surprise, as quickly as I was confronted with the place, I was just as suddenly beyond it. It fell out of sight as the cab driver turned right on Kensington Road.

When we arrived to our hotel, we were in a neighborhood I had explored. Everything seemed new to me as we avoided many of the major tourist attractions. We did spend time in the parks that I had loved so much, but I saw London with different eyes at 25 than at 20, and I experienced a place that had changed so much from when I'd been there before. My trip affirmed to me the personal growth I had experienced, but those familiar sights also reminded me that my experiences the 20-year-old girl in London will always be within me as I continue to grow.



London, September 2014

Part Two:

The Question of Trauma and Memoir – An Analysis

The Question of Trauma – A History

The modern understanding of trauma and its lasting impact on the body and mind is, historically speaking, a recent development. Philosopher Ian Hacking states that late into the 19th century, trauma was an uncommon term, only used by surgeons when treating wounded soldiers (Hacking 39). By the 1980s, Freud's writings on repressed memories and trauma brought the term into mainstream culture, and while theories on its meaning would develop significantly over the last decade of 1800s and into the 20th Century, Freud's early understanding of psychic trauma remained foundational (Hacking 41). The increased dialogue about trauma and memory around this time shifted the focus of trauma from merely related to the physical body toward the repercussions on the soul (Hacking 42).

Throughout the 20th century, the implications of war continued to generate the most discussion around trauma. Shell-shock became a repercussion named during WWI as a result of soldiers showing signs of memory loss from traumatic experiences and mental instability. The early cases of shell shock, however, went mostly untreated. At this same time, trauma was also a growing topic relating to women. "Hysteria" became a popular diagnosis for women's behavior, and repressed traumatic memories were named the cause (Hacking 44). Although doctors readily diagnosed women with hysteria, shell shock remained an isolated experience related to war.

In her book The Limits of Autobiography: Trauma and Testimony, written soon after the turn of the 21st century, Leigh Gilmore argues that the separation between hysteria and shell shock was a result of gendered politics. To relate the effects of war on men to a diagnosis of hysteria would, it was feared, tarnish the war effort and sense of nationalism (Gilmore 26). Conversations about hysteria and traumatic memories in women developed further into the 20th century, but it was not until the Vietnam War that the mental impact of war on veterans was fully

acknowledged. Because vast numbers of men returning from Vietnam were suffering beyond their physical wounds, the US Veterans Administration coined the diagnosis of Post-Traumatic Stress Disorder (Hacking 44). Hacking asserts that while the need to remember is not newly characteristic of society, the politics of memory that arose in the late 19th century and a deep desire to remember motivated the conversations about trauma throughout the 20th century (Hacking 44).

Leigh Gilmore examines Hacking's concept of traumatic memories in more depth, focusing on the sociopolitical movements of the mid to late 20th century. Gilmore maintains that the cultural events of this time led to the rise in trauma autobiography and, more specifically, the rise of the memoir. For the past 50 years, American culture has been exposed to the power of stories—stories about women, minorities, the LGBT community, war, violence, and disability. Gilmore proclaims that, “Every autobiography is the fragment of a theory. It is also an assembly of theories of the self and self-representation; of personal identity and one's relation to a family, a region, a nation; and of citizenship and a politics of representativeness (and exclusion)” (Gilmore 12). The personal narratives that arose in the mid-20th century sparked dialogue in critical and theoretical topics surrounding cultural ideals such as gender, sexuality, and class, and they have helped position autobiography within the academic world (Gilmore 16).

While the rise of trauma autobiography advanced into the late 20th century, the limitations of trauma autobiography also became clearer. Trauma is almost exclusively an unparalleled experience. Biologically, our bodies are not able to fully comprehend a traumatic experience because of (and as indicated by) memory loss (Gilmore 30). Brain research suggests that the hippocampus—which is the main structure for memory—shrinks as a result of trauma, which can lead to the loss of memory (Gilmore 31). This memory loss, as well as the immense

difficulty in acknowledging a painful experience, make trauma difficult to articulate, both in speech and in writing (Gilmore 6).

Autobiographies have historically been rooted entirely in fact. As a result of the impact trauma has on memory, it is seemingly impossible that a narrative of trauma can meet this expectation. Memory, as Gilmore states, is “only as authoritative as the person who is remembering” (Gilmore 24). When writing about trauma then, Gilmore argues in favor of fiction within trauma autobiography. Creative non-fiction and memoir provide a trauma survivor an outlet to narrate his or her experience without the scrutiny of fact (Gilmore 24). Memoir allows for the narrator to find a balance between the subjective and the objective. By reflecting on his or her thoughts and feelings, a trauma survivor is able to find greater meaning in the traumatic experience and place his or her narrative in a greater context.

Gilmore provides case studies to explore critical questions and themes about trauma autobiography and memoir, such as Jamaica Kincaid’s There Will Always Be a Mother, Dorothy Allison’s Bastard out of Carolina, and Jeanette Winterson’s Written on the Body. Within these texts, Gilmore examines themes such as incest, abandonment, death and lost love. She studies how these trauma autobiographies demonstrate representations of the self, and Gilmore relates these representations to the cultural contexts in which the traumatic events occurred. While the examples that Gilmore provides are unique to each writer’s experience, they touch on themes that have become more common within the genre of memoir.

During my recovery, I struggled to find stories like my own about unexpected accidents, particularly among young people. I found news stories about the deaths of teenagers and college students as a result of alcohol, but those stories were devoid of the victim’s perspective. They would mention a “drinking culture,” or that the victim was “a star athlete and student,” but they

did not explore the personhood of the victim. Like a rigid autobiography, the stories I found were focused strictly on “facts,” or the perception of facts.

When I first considered writing about my traumatic experience for my final project, I asked myself “why would anyone want to read this?” Even when proposing my project, I was told I should anticipate the committee questioning why a 25-year old should write a memoir. My accident occurred when I was 20-years old, and while I certainly hadn’t gained many life experiences before my fall, most aspects of how I responded to my accident were deeply rooted in learned beliefs and values from my childhood, such as my drive to excel academically to avoid the punishment I’d witnessed my older brother experience.

Stories like mine still seem rare, but as a result of my accident, I’ve tried to pay more attention to those that are told. I’ve witnessed close friends deal with the death of a college roommate as a result of a car accident, and my close friend Violet found comfort in calling me from the hospital when she suffered a fall of her own, resulting in a fractured spine. These stories *are* common, and it’s important that other young people hear narratives like mine to challenge their own assumptions about the world and understand that they are not alone.

My goal with my stories was to reveal how many childhood and adolescent experiences inform our perceptions as adults. Most adults are never challenged to question some of these beliefs that they internalize as children until they are faced with an experience that shifts their perspective. At 20-years old, I was not only in the midst of transitioning into young adulthood, I also had to examine deeply rooted aspects of myself in order to heal mentally after my accident. My path to self-discovery was interrupted by my accident, but the new perspective I gained during my recovery strengthened my identity as a young adult.

The Need for Narration – The Need for Memoir

Leigh Gilmore focuses her book on the necessity of memoir as a way for trauma survivors to recount their experiences without the strict confines of traditional autobiography. However, even if a trauma survivor does not write out her or his traumatic experience, narrating that experience is essential for the recovery process. In the essay, “*The Wordless Nothing*”: *Narratives of Trauma and Extremity*, co-authors M.J. Larrabee, S. Weine, and P. Woollcott elaborate on the benefits of narrating trauma for both the speaker and listener.

The main focus of their essay is within the context of a psychiatrist’s interactions with a trauma patient. Referencing Professor of Sociology Arthur Frank’s book *The Wounded Storyteller*, the authors claim that, “where trauma is concerned, matters of language are fundamental. They are a core part of why people suffer, what they identify as wrong with them, and how they might be able to get better” (Larrabee et al. 365). Narrating one’s experience out loud to a psychiatrist, for example, allows a survivor to seek help in forming language to describe their traumatic experience and find ways to express how to move forward.

Survivors who are able to formulate a narrative about the trauma of their accident often experience an almost contradictory sense of comfort (Larrabee et al. 369). Narrating their stories allows a survivor to express out loud or on paper what they have been through and recognize what they have overcome. Their own strength is revealed to them through their words. Not only is their strength revealed, but the reality of life is also made clear. We are all mortal and we are all susceptible to trauma. By acknowledging these basic fundamental facts that most people willingly blind themselves to, a trauma survivor can move forward with their life feeling fully content (Larrabee et al. 370). Trauma survivors, however, need not be the only individuals to

recognize human mortality and circumstance; listeners and readers alike may also find value in hearing or reading a survivor's trauma narrative.

Woollcott does not just consider the survivor's outcome from having narrated a traumatic experience. Woollcott believes that because each participant brings his or her own past experiences and expectations to the process, the interaction between people over a traumatic story allows participants to understand both the other's life and gain a better understanding of their own (Larrabee et al. 366-68). The exchange between a patient and a psychiatrist creates significance greater than the situation of patient and professional (Larrabee et al. 368) because, while the patient is in the process of healing, his or her story may also instill in the psychiatrist a sense of his or her own strength (Larrabee et al. 371).

In their concluding comments on the role of dialogue, the authors recount a story in which a recent Bosnian genocide survivor spoke to a room full of medical professionals and study groups on trauma. During his narrative, the trauma survivor became overcome with emotion, and the audience members were overwhelmed with the suffering recounted in the man's story. The room fell silent, some of the audience members feeling uncomfortable from the trauma that was so far from their own world experience. Though the silence suggested disconnect in the room, the authors state that a profound connection had actually been made that day:

Yet the ability to overcome the tendency to withdraw into one's singularity is the beginning of empathy, a healing connection. Those in the audience, including medical faculty, students, interns, other mental health workers, and researchers, could experience with the man the immobilizing effect of such trauma, regardless of differences in training and experience. Thus in a person in the grip of extremity

there is potential for a special connection with others, a manifestation of our social existence. (Larrabee et al. 370)

To this day, when I share with others a recap of my accident, I hear responses such as, “I can’t even imagine,” and “I wouldn’t have been able to make it through all of that!” Without having experienced something so unusual and unprecedented, it’s perfectly reasonable that many people can’t imagine what my experience was like. In fact, there were plenty of occasions throughout my recovery in which I thought I wanted to give up. It was incredibly hard. But deep within most, if not all of us, evidence shows that there is a strong resilience to survive, and trauma stories may help non-experiencers discover this will within themselves.

Young people tend to feel the most removed from traumatic events, and this is why it is essential for trauma narratives by the young to be accessible. Memoir allows trauma survivors to express their subjective experience in a way that makes the most sense to each individual. Given memoir’s diverse structure and continuously growing popularity, it is the ideal outlet for young trauma survivors to share their stories and for non-trauma experiencers to access these stories. Memoir helps create significance and meaning even greater than that experienced between a trauma patient and a professional because through memoir, trauma survivors’ voices can be heard and seen through their words and images, and this language touches and derives compassion from vast numbers of people—all with their own unique experiences and perspectives.

Shattered Moments and Post Traumatic Growth

When I began writing my stories in the fall of 2013, in Margaret Sartor's *The Unconventional Memoir*, the image of "shattered moments" came to mind after I recounted the actual night that I fell from the roof in London. I had become detached from the girl in the story who finally let loose and decided to party with her classmates who were only slightly more familiar than strangers. As I wrote, the first scene from that night flowed in an easy rhythm, and I couldn't help but smile when I thought about how electrifying the night seemed prior to my accident. I, however, knew how the night ended, so writing the second scene, recounting those first moments when I woke up in the hospital, felt like a double decker bus had come out of nowhere and struck me. Even as the writer of my own story, I was stunned and uneasy. I imagined the first half of my night playing on a movie screen at the beginning of a lighthearted coming of age drama, but once faced with writing the reality of the fall, the movie screen in my mind's eye shattered into hundreds of pieces before it turned black. Briefly, I had gotten lost in the fantasy of what the story could have been when *my* story was never going to be the reflection on a life changed by three months spent studying abroad in London and with many more nights like the one I started out having.

As I continued to reflect on my accident and recovery, I explored memories that stood out to me from my childhood, and the theme of "shattered moments" emerged again as I turned my memories into stories. I reflected on the moments as a child and a teenager when I had gotten caught up in a moment of pure joy and excitement, only to have that moment abruptly interrupted. Those moments included my friends laughing at my cherished slippers when I was six, my dad catching me breaking a rule and, instead of punishing me, called on my mom and brother to witness, all while laughing at what I considered to be my deep humiliation. I wrote

about the torment of constantly witnessing my brother being punished for his poor grades in school. And I relived a scene from my senior year of high school when my closest girlfriends made a harmless comment that cut me so deeply that I withdrew my affection from them completely. As I wrote all of these memories, it became clear that I had internalized many unhealthy beliefs about the world and about pleasing others until my accident forced me to question myself and my beliefs.

While researching sources for the analytical portion of my final project, I came across Stephen Joseph's *What Doesn't Kill Us: The New Psychology of Posttraumatic Growth*, published in 2011. I ordered the book after reading the reviews, not even glancing at an online preview of the contents. Upon receiving the book in the mail, I flipped through the first few pages and let out a slight gasp while scanning the table of contents. Part One of Stephens' book is entitled "Everything Changes," and it details research and theory on the immediate biological and emotional aftermath of trauma. But what caught my eye was the title of Chapter Five: "The Theory of the Shattered Vase."

This chapter title in the list of contents appears almost exactly in the center of the book page, and these were the first words I processed. My heart started racing in anticipation and anxiousness as I turned the pages to begin reading about Stephens' theory and use of the term "shattered" to describe the post-trauma experience. It felt like a serendipitous moment, as I'd unsuspectingly come into possession of a book that so closely related to my own attempt at interpreting my accident and recovery.

Stephens begins "The Theory of the Shattered Vase" by outlining Mardi Horowitz's five phases of trauma: "outcry, numbness and denial, intrusive re-experiencing, working through and, finally, completion" (Stephens 95). Trauma survivors may experience some or all, and they may

experience the first four out of order, but the last two phases struck me as I related them to writing the stories for my final project. To work through a trauma, survivors must examine the facts of their experience closely and come to terms with the events. While survivors cannot rid themselves of all the aspects of their traumatic experiences, once a survivor is able to recognize and discard the aspects they can control, such as guilt, anger, fear, embarrassment, etc., they will be able to better make sense of their experience and move on to the last phase of completion (Stephens 98).

The most important part of the ‘working through’ phase, according to Stephens, involves finding a balance between our pre and post trauma self. At its heart, trauma is unexpected. Trauma is a disturbance that derails a person’s life, typically over a long period of time. Trauma challenges, and often destroys, the many assumptions about the world that an individual has come to believe and value. Our “assumptive world” consists of the underlying assumptions that inform the foundation of our understanding of the world. Stephens cites child psychologist John Bowlby, who claims that the assumptions that make up our mental models as adults develop early on in our childhood, which is why adults are often so unaware of their pre-conceived beliefs until they are forced to examine them (Stephens 99).

Stephens then describes the three major deep-seated beliefs in Western culture that were first introduced by social psychologist Professor Robbie Janoff-Bulman. The first of these underlying beliefs is that “the world is benevolent” (Stephens 100). As a culture, we tend to believe that we are invincible and that nothing bad will ever happen to us. We are disconnected from the tragic stories we hear on the news, thinking *this could never happen to me*. The second of the deep-seated beliefs is that the world can be controlled, and outcomes are predictable. This belief ties seamlessly to the third common assumption regarding “our tendency to view ourselves

in a positive light” (Stephens 100). In other words, if we do all of the right things, then we will yield positive results. If something bad happens, then it was likely deserved.

Trauma, in its unexpected nature, completely destroys these underlying beliefs. Professor Robbie Janoff-Bulman likens our fundamental assumptions to a scaffolding: “Trauma,” Professor Janoff-Bulman argues, “brings that scaffolding crashing down, exposing us to the stark realities of existence—namely, that we are frail and mortal” (Stephens 101). As with Professor Janoff-Bulman’s scaffolding metaphor, when I fell 30 feet to the ground in London, my own understanding of the world came crashing down with me, and I was faced with finding meaning in my experience in the years following my accident.

Before my fall, I had embodied all three of Professor Janoff-Bulman’s beliefs. I felt removed from the stories of tragedy, even those that occurred to college students very much like myself. I truly believed that complete self-control and self-discipline would keep me from harm’s way. This belief made the first few months of my recovery so difficult because I obsessed over the facts. I had been drinking that night. I was breaking a rule by going out on the roof. Therefore, the fall was inevitable. It was my fault. I deserved the pain. My thought process and mindset kept me from moving beyond the first three phases of trauma. My fall challenged the illusions that I held onto so strongly, but for months, self-blame and a misguided belief that I could have prevented my accident was my way of holding on to my old values. My mentality after my accident is not an uncommon one, and is the reason it can take years for survivors to move into the “working through” phase and finally into “completion” (Stephens 108).

At the end of the chapter, Stephens finally unveils the ‘Theory of the Shattered Vase.’ He asks the reader to imagine that a close friend has gifted him or her with a vase. One day, you accidentally knock over the vase that you’ve come to treasure, and the vase shatters into

hundreds of pieces on the floor. Some people may gather all the pieces and glue the vase back together. While it may look close to what it once was, there will still be small cracks in the vase, and the foundation will only be temporarily held together. Though it's essential to understand that the vase can again never be what it was before it shattered, Stephens emphasizes that it is important to think about how you can use the shattered pieces to create something new. In order to find closure after a trauma, survivors must integrate their previous selves with the new perspective they've gained after their experience. They must get rid of the pieces that are too broken to reuse, but they should keep the pieces that can become something unique when paired with new materials (Stephens 105).

Until I could let go of the belief that I had total control in my situation, I was unable to let go of the anger, shame, and guilt I felt during my recovery. Ironically, losing all sensation of feeling in my left arm after my first elbow surgery is what ignited a change in my mentality. I was furious at my surgeon, but experiencing yet another traumatic obstacle, this time one that was completely out of my control, made me realize the greater context of my accident. It was an *accident*. Blame and guilt no longer claimed a place in my mind. Still the determined young woman, my recovery became more about following my passions and making decisions based on my personal desires, not those that I deemed appropriate by society's standards.

Most adults will never even recognize how important the values formed in their early lives are, but trauma forces survivors to find new meaning and build new mental models after their understanding of the world is challenged. Posttraumatic growth is a process, and it involves questioning long-held beliefs that developed in us early in childhood (Stephens 113). The stories for my final project are not always linear, but I pieced the stories together by picking up the shattered pieces of my life, the ones that shaped my pre-accident perspective as well as those

pieces that helped me heal in the years following my fall. While surgeries and physical therapy helped to heal my body, these stories, and the memories from which they were derived are, at heart, the basis for healing my mind.

Narration is essential for trauma recovery, and for me and many others, memoir has been the narrative outlet. Narrating my own recovery allowed me to look back at my past family history and the belief systems I had internalized at a young age and as a teenager. By doing so, I was able to better understand why I felt so much self-blame immediately following my accident and what eventually helped me derive my own sense of strength, motivation, and identity toward the end of my physical recovery.

My recovery is still ongoing. It is a process, as is my journey of self-discovery. It took a 30 foot fall for me to find my sense of self, but my hope is that through these stories and this project, others may relate to how it felt to experience such a life-changing, traumatic accident. Additionally, others may also identify with my experience as a young woman intent on avoiding trouble, pleasing her parents, and being well liked by everyone to the extent that her identity was defined by others for the greater part of her adolescence and emerging adulthood.

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