

A Moment in Time

Awaking to the crisp, clear, pine-scented boughs,
I hurriedly outfitted my form, still girlish at twenty-two.
Mounting excitement thundered in my chest,
Like echoing canyons celebrating another day.

Hard-packed snow, reflected brilliant hues,
Nature beckoned me to snow-filled
adventures, I acquiesced.
Careening on inner tube, my landscape of white,
without warning,
Plummeted, earthbound, eight feet.

Creeping steadily like the rising mercury in a thermometer,
paralysis took me hostage.
A battle ensued; fear charged in demanding submission,
Darkness and light dueled for the win
while I lay motionless.

Sirens, firemen and paramedics
lifting me onto a wooden gurney,
Drifting in, drifting out, where am I now?
Cold, *so very cold*, yet warmed
by the compassion of strangers.
Air lifted to Loma Linda Medical Center, en route
three quarters of me died,
while a fourth struggled to live.

Four months this would be my domicile.
Occupational therapy, physical therapy,
R-E-H-A-B-I-L-I-T-A-T-I-O-N,
Someone else lifting my legs,
Someone else brushing my teeth,
Someone else wiping my ass.

Then the visitors,
balcony friends for the most part,
but a few, relatives of Job's comforters,
pious saints, quoting me Romans 8:28,
"all things work together
for good for those who love God."
I wanted to spit. But refused, for fear
I would wear the saliva interminably.
Seeing the call button, unable to reach.

As days blurred into nights
And nights into days,
Time touched and healed three dimensionally.
Doc played "this little piggy" and
I could FEEL which little piggy.
Volcanic theology settled into peaceful
inactivity once more,
and life focused and refocused.

Altering perceptions,
glimpsing down roads eternal,
where Spirit and Character are age-old companions,
I met myself there.
Recognizable not by what I did
but by who I had become.

Chapter One

A Moment In Time

In a moment in time, life as I knew it instantly and irreversibly changed. On February 6, 1982, I joined the high school church group as a peer counselor to attend a winter weekend retreat at Big Bear Mountain in southern California, where I was born and raised. I had been to the mountain numerous times to stay at a friend's cabin, hike, shop, skate, go to the movies, and, on several occasions, ski—typically on man-made snow, due to the temperate climate. I grew up an hour and a half southwest of the mountain, but snow was an unfamiliar novelty for me. The climate I was used to consisted of fun-in-the-sun beach get-togethers, warm fall days and dry winters.

Stepping outside on that beautiful sunny afternoon at Big Bear Mountain, I was an energetic 22-year-old peering down a vibrant road of possibilities. I positioned myself next to my boyfriend, Peter, on a big, inflated tractor-size inner tube. The teens in front of us tubed down the snow with excited laughter. We, too, squealed with delight as we lay on our stomachs, pushed off with our feet, and headed down the hill. After following the same path as the other snow enthusiasts, we then veered to the right. With two of us on the tube, and the momentum increasing, it was a matter of seconds before we found ourselves airborne and then pulled by gravity into a rapid descent. We had soared over the edge of a giant boulder.

Flying through the air on our stomachs, our arms wrapped tightly around the tube and each other—we hit the hard-packed snow with a jolt. The trampoline effect catapulted me back into the air. Somersaulting, I tucked my head in as any trained gymnast would do, but the hard-packed

snow crushed my vertebrae on impact. Within seconds, like the rising mercury in a thermometer, I felt the paralysis begin in my furthest extremities—then creep up my legs, my waist, and my chest. A very large weight seemed to drop on my chest, and I began to suffocate.

As my panic mounted, the final horror was realizing that my arms and hands were no longer working, and that I was powerless to remove the weight that had pressed me into unconsciousness. Like the bird I had seen slam into our sliding glass door and fall lifeless to the ground when I was a child, I, too, lay wounded and motionless with a broken neck.

Initially, I lost all functional use of my body from my neck down. When I awoke from lapsing in and out of consciousness those first 24 hours, I had a vice clamp attached to my head that constricted my view to the ceiling, and tongs attached to weights designed to keep my neck completely immobilized. But this traction was only temporary. I was scheduled to undergo surgery in three weeks to fuse my neck at the cervical 6-7 level to prevent further damage or loss.

When I awoke and regained consciousness from that surgery I had another contraption attached to me. A flat, one-inch steel bar, called a halo, encircled my head looking like a medieval, hideous cage with all its accoutrements. It had a large breastplate made of plastic, lined with sheepskin, the one redeeming quality, to keep my skin from being chafed. Steel bars were attached to the chest plate, which went up and over my shoulders. Attached to these bars were two more steel bars that attached to both sides of the halo. In gruesome fashion, four three-inch bolts, pointed sharply at the ends to pierce the skin upon entry, were screwed into my head, two in the forehead and two in the back of the head, to hold my halo in place.

A saint I ain't, but a martyr? I was beginning to wonder, specifically when the doctor returned at a later date to tighten

those bolts in my head with a pair of pliers. Feeling the needle going into my head to numb the areas where the bolts were inserted, feeling the blood and tears dripping down my face, and hearing the bones moan as he tightened the bolts was excruciating. I came close to passing out, but instead reined in my thoughts and found strength in my faith. I thought of Christ's crown of thorns and my similar pain and piercings. I thought about a book I had once read, describing hundreds of Christian martyrs who were tortured, then died in a grisly, heinous manner. I remembered my amazement at how the martyrs, men, women, and children, were set ablaze by their persecutors, and in the midst of their infernos witnesses saw them lift their hands in worship and heard them singing as they burned. I surmised there must be a place in immense suffering where the soul and spirit transcend the physical body. I visited that place that day.

During the first month's blur of traumatic shock, drug-induced time warps, and surgery, the halo brace allowed me to progress with my rehab. Psychologically throughout this time, I had a tremendous outpouring of support from my local church, family, and friends. Love and spirituality were palpable in the intensive-care unit of the Seventh Day Adventist hospital where I recovered. I will never forget the nurses who surrounded my bed in the twilight and prayed for God's strength and healing for my mind, body, and spirit. One nurse brought me a white gift box containing two dark and two white chocolate-covered strawberries, treating me to a delicacy I had never tasted before. Every Friday evening, like a group of minstrels, singers traveled from bed to bed performing songs to uplift and encourage those patients in the ICU. If these conditions sound idyllic for a hospital setting, they were. I've since learned there is a Good Samaritan sculpture, a larger-than-life graphic representation of the parable told by Jesus, located on the campus mall of Loma Linda University Medical Center (LLUMC) bearing

the inscription, “to make people whole.” I owned nothing at the time I was injured, had no medical insurance, no money. Instead of arriving at an inn, I was medivaced to a hospital. Instead of setting me on an ass, somebody cleaned mine. For one hundred and twenty days, Good Samaritans comforted, fed, bathed and cared for my broken body.

Rehab continued, but paradoxically my body both progressed and regressed. One never knows, doctors included, what functions a spinal cord injury (SCI) patient will regain until the swelling around the injury site has diminished. I learned that the most common misconception the general population has about quadriplegia is that all four limbs are rendered useless. Rather, every SCI injury, neck or back, has its own idiosyncrasies. Bodies are impaired to varying degrees. Injuries are categorized as either *complete*, the spinal cord is completely severed and messages do not get through, or *incomplete*, messages travel like a frayed cord but get short-circuited.

Somewhere in the day-to-week-to-month process I went from scribbling, with a hand held over mine, an unrecognizable signature, to refashioning my name once more. An occupational therapist had the job of retraining my fine motor skills. She placed a board in front of me, studded with eight threaded bolts, and I agonized over my repeated attempts to screw nuts onto the straight standing bolts. It took more concentration and concerted effort at twenty-two than at two, when my nuts and bolts were plastic. And just like a little tyke, I basked in the smiles of approval for a job well done. Gradually my finger dexterity, hand functions, and movement in my arms all greatly improved and I was classified an *incomplete*, but revisiting my toddler years was not over just yet. Next I had to learn how to relieve myself all over again, and this new potty training was a lot more work. Paralysis means that both the urethra and the sphincter no longer operate on command; like a traffic jam, messages traveling in either

direction do not get through. So for an hour or more each week a nurse rehabilitation specialist, Barbara Frye, came to my room to instruct and educate me on what life would be like living with an SCI.

If you've ever seen a demolition site where a gigantic steel ball swings from its crane, gaining momentum to slam and utterly destroy its target, you will intellectually understand the destruction and annihilation of an SCI. Just like the wrecking ball that crashes into the building, demolishing the infrastructure, so too does the impact of an SCI wreck and wreak havoc on the internal structures of the human body. People who sustain an SCI are buried alive in its wreckage. The injury is a death to every familiar way of being in the world. Reaching deep inside themselves, they must scavenge in the rubble for the courage to dig out and find a way to reinvent their lives.

In my weekly education classes with Barbara, through trial and error, we tried to find what method worked for emptying my bladder. There were four methods that I remember, and if just one of them was successful, I would not have to use a catheter as an assistive device to accomplish this task. What appears to work favorably for most is called *crede*. When one's bladder is full, one merely has to push down on the bladder with both hands to get it to *kick off* or empty. There can be no residual urine left in the bladder or one risks an infection. Urinary tract infections, (UTIs) are a chronic secondary condition to SCI and can lead to kidney malfunction and death. Another method introduced was putting ice cubes on the bladder area, in hopes that the cold would stimulate the kick off. I don't know if I hated the ice cubes because my injury occurred in the snow, but they had no effect.

A third method was tickling the designated area with a paintbrush. Imagine, instead of pulling my comb out of my purse, I grab my paintbrush and artistically stroke for

quick relief. And if I thought *that* was a bit odd, the last method introduced was completely humiliating. “Just apply short, quick tugs on the pubic hairs to stimulate relief. Oh, and the entire time you are potty training you’ll have to wear Pampers. (She said underpads. I heard Pampers.) And...uh... it might take up to a year to retrain your bladder.” Inside, dignity’s wall crumbled, demolished by the wrecking ball.

After a few months of trial and error, kicking off unexpectedly, and soaking a couch while out on a three-hour hospital pass, I opted for the intermittent catheterization program. As a female with a high injury level, I was never able to master toilet transfers during or after my hospital rehab. It remains a cumbersome, exhausting, accident-waiting-to-happen experience that I have chosen to forego. That decision has undoubtedly been my saving grace living as a sit-down person in a stand-up world.

Next, I was to find out how the bowel program worked. While I was lying in the ICU—unable to get up and go to the bathroom—I assumed there had to be some type of backup procedure in place. The first month after my injury was mostly a blur, but I do vividly recall a Ukrainian nurse with her Russian accent repeating in a voice that was way too loud, “Try to push, Nannette, try to push.” This suggestion, accompanied by a familiar odor, was a big clue to my roommate and her visitors exactly what process was in motion. What they didn’t know was that behind my semi-private curtain, the nurse’s gloved hand was digitally stimulating my anus to produce the desired effect. Barbara told me that living with paralysis would require a future of *digital stims* necessary for evacuation. Inside, another wall collapsed. I could just see the dates lining up for my twenty-third birthday.

There was more. “Don’t eat popcorn, crackers, or potato chips while in bed. They could leave an indentation in the skin which, worse-case scenario, could become a decubitus ulcer.” A pressure sore usually occurs on the ischiols or

coccyx due to prolonged sitting. Some sores can take up to a *year* to heal and may require surgery, skin flaps, and months in bed recuperating.

Barbara continued, “In the summer, be aware of hot metal on the seat belt buckle and the floor where it connects; it can burn you and you won’t feel it. The same applies to hot water and bathing.” I was beginning to feel like a sentry, forever on guard for the rest of my life.

We finished with a class on sex and SCI, but I don’t remember much about that one. I was fortunate to have regained sensation and therefore had feeling, but no movement, because of my incomplete injury. I wasn’t worried about sex after injury. I always believed good communication, a strong sense of self-worth, and mutual respect were the key ingredients to healthy sexual activity. Of course, regaining the ability to feel *was* a gigantic plus.

With classes over and a discharge date in sight, I felt immense gratitude for the humane and compassionate care I had received during my hospital stay. There were kindnesses large and small: from the medical staff, to the little kindergartners who sent their hand-made get-well cards that decorated my drab hospital room walls, to a friend I’d met in Amsterdam who left multiple kisses on my acne-covered face (by-product of the meds), and carried me to a visiting room while I wore my hideous cage. Throughout my rehab there were two other men who came to see me on an almost daily basis. Peter, who had shared the inner tube ride with me and merely got the wind knocked out of him, and Marty, whose mother was also in ICU undergoing treatment. My father came to visit as often as he could, but my mother, who lived fifteen hours north, was only able to visit twice the entire time I was hospitalized. Four months prior, she had buried my step-dad, Pops, and was left straddled with a failing business and a balloon payment coming due on her

home. In the end, she lost both. Her grief, devastation, and emotional paralysis were tantamount to my own.

How could I ever know that, in a moment of time, I would no longer dance, do gymnastics, or walk along the beach as a southern California girl? And, although I was buoyed by a phenomenal outpouring of love and encapsulated in a bubble of grace during those post injury months, I still deliberated with myself about the meaning of life.

When I left the hospital, my philosophical musings came in rapid succession. How can life undergo a massive and monumental change without any warning? Why do bad things happen to good people? Why must we be subject to so much tragedy? Why is life so unfair? And, ultimately, why me? Pondering these questions, I discovered what the poet Keats called *negative capability*. When we go through negative and traumatic experiences in life, we must find ourselves “capable of being in uncertainties without any irritable reaching after fact or reason.”¹ As I contemplated life’s paradoxes and the nuances separating these extremes, it was doggone hard *not* to search for fact or reason, but I concluded that most of life’s unknowns exist in the nebulous realm.

A few years after my injury, *The Mission*,² starring Robert De Niro and Jeremy Irons, was released. The movie was based on actual historical events that occurred around 1750 along the borders of Argentina, Paraguay and Brazil. Very few white men had ever penetrated the area inhabited by the Guarani Indians, who lived above the waterfalls, except for the Jesuits who eventually Christianized the tribe and built the San Carlos mission. The only other well-known white man to the area was Captain Rodrigo Mendoza, played by De Niro; a mercenary and slave trader who hunted above the falls for his human prey.

Mendoza returned after one such excursion and found the woman he loved in bed with his brother. In a flurry of uncontrollable rage, he gave chase to his brother, stabbed and

killed him. Mendoza came to believe that his only penance was to live and work among the Guaranis. Eventually he took vows to become a priest and served the Guarani people alongside Father Gabriel, a Jesuit played by Irons.

The Guaranis and Jesuits flourished, producing artisans, musicians, builders, craftsmen, and lush agriculture and food sources. But because their land was not officially or legally procured, a political battle brewed over its ownership. The territory was coveted not only by the Portuguese, the Spanish and the Jesuits, but also by the Church of Rome. In the end, the Guaranis and the Mission were caught in the crossfire as the Portuguese moved in to conquer the region.

When Mendoza heard of the coming invasion, he renounced his vows of obedience and chose to fight with the Guaranis and several other priests who had aligned themselves with them. He sought out Father Gabriel for his blessing. In a tight-lipped response, Father Gabriel reminded him that God is love and that he had promised his life to God. With fists clenched, Father Gabriel told Mendoza that he did not have the strength to live in a world where *might is right*. He turned his back, sadly shook his head and said, "I cannot bless you."

Father Gabriel and the Guarani women and children sought refuge inside the sanctuary to pray and await their fate. Meanwhile, Mendoza, other Jesuits and tribal warriors, prepared to defend their people. Once the siege began, the only sounds heard were the arrows' swoosh, the gunfire's rat-a-tat-tat, and the melodic singing from inside the sanctuary. There were no more words. A massacre unfolded. Mendoza, mercenary-turned-priest-turned-mercenary, was shot multiple times and lay dying on the ground. He lifted his head to gaze on Father Gabriel, the embodiment of peace, who was holding the Crucifix high in the midst of the Guaranis. He watched as his brother, gained in priesthood, was peppered with bullets and crumpled to the ground—they

each died alike. In a matter of hours, the Jesuits and Guarani all lay dead in a bloody massacre.

The moral, ethical, and existential dilemmas presented in *The Mission* brought me back to my own philosophical musings when I was newly injured. First, the story of the Guaranis, like our own stories, underscores our co-existence with life's complexities, sufferings, and paradoxes. Second, the lenses through which we see world events and life's greater design are limited; therefore our understanding is limited. Third, history is replete with sordid stories of power, fear, and greed that perpetuate inequities, and I sadly suspect the future will be the same. Fourth, Captain Mendoza and Father Gabriel were committed to their own perceived truths, desired the same outcome, but were polarized in their course of action.

Questions I had pondered were resurrected. Was there anything *fair* about the outcome for the Guaranis? We expect and even feel entitled to the thought that *life is fair*, but while lying in the hospital, scavenging around in the rubble left by the wrecking ball, I concluded that there is nothing *fair* about accidents, injuries, disease and death. *What was God's position on this bloody massacre?* I had to recognize that God's roles are often paradoxical, for he is known as both Peacemaker and Warrior. Like Father Gabriel and Mendoza who shared their love for God, yet took opposing courses of action. This spoke volumes to me about my core beliefs. In the end, whether we fight for peace or fight in war and die beside our sisters and brothers who agreed or disagreed with our philosophy, the bottom line is that we must live what we believe.

By the time my discharge date rolled around on June 6, I had begun to find answers to several of my existential queries. I came to believe that we co-exist with life's complexities, sufferings, and paradoxes; that our knowledge and understanding is limited; that life is not fair; and finally, to

Pain, Power and Promise

live resiliently, we must live what we believe and accept the uncertainties inherent in life.

Upon my discharge, I would leave behind the comfortable environment where wheelchair users, amputees, trauma survivors, large hallways, and accessibility were commonplace, and I would be thrust—it felt more like being thrown—out the door to live as a sit-down person in a stand-up world. Ms. Philosophy was about to roll into reality.

**PAIN'S FIRST HIDDEN PEARL:
Accept the Paradoxes Inherent in Life**