Sad Songs

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After I graduated from high school, I worked for about 18 months as an occupational therapy aide at Elk’s Rehabilitation Center in my hometown of Boise, Idaho. During that time, I worked with people with various disabilities, including a lot of young people who were paralyzed. Eventually, I decided that I wanted to be an occupational therapist, and I quit my job and left for Kansas University to major in occupational therapy. I took a creative writing class just for fun, and I wrote this short story for that class, using my experiences at the rehab center.

I earned my degree in occupational therapy and practiced for more than a year, but then I married Kenji Kitao, whom I had met at KU, moved to Japan, and got involved in language teaching, linguistics and communication. I thought this short story had been lost, but when I cleared out my office in preparation for my retirement, I found the manuscript. It reflects a very different time in my life and reminds me of a lot of things I had forgotten. I made a few small changes, but no major edits, because I wanted to retain the reflection of that time in my life.
The small car pulled off of the mountain road and a young woman got out, stretching her legs and breathing the crisp air deeply. Julie was just over six feet tall and proud of her height. Leaning against the car, she pulled off the hiking boots and heavy socks and tossed them through the open window into the back seat with her backpack. It felt good to be able to stretch her toes. She walked across the road to stand on the edge of a drop off several feet above a rushing creek. It would be nice, she thought, to climb down and dangle her feet in the cold water. The two days she had spent hiking in the mountains had been exhilarating, and it was hard to go back to the reality of the city. Julie stretched once more, crossed the road slowly, and climbed back into the car. Starting the engine, she pulled back onto the road.

When Julie woke up, she was in a hospital room. Through the window, she could see Fairview Avenue several blocks away with its steady stream of traffic. She realized that she must be on the third or fourth floor of St. Alphonsus Hospital. She was in the bed next to the window. The other bed was empty. She had a nagging impression that something was wrong. Suddenly she realized that she couldn’t feel her legs, and she struggled, trying to sit up, but she couldn’t. Raising her head, Julie saw the twin mounds that her feet made. The terror subsided but not the
anxiety, especially when she realized that neither could she feel her abdomen or lower back. Nothing below her shoulder blades. She reached under the covers and touched the side of her leg with her palm. She could feel her leg under her hand, but she could not, hard as she tried, feel the pressure of her hand on her leg. Experimentally she tried to bend her right leg. Nothing happened.

A nurse appeared in the doorway and said, “Hi, Julie. How do you feel?”

“Really strange, Julie said shakily. “What happened to me?”

“The doctor would like to talk you about that. He’ll be here in a few minutes.”

The doctor was a portly man who introduced himself as Dr. Bray. He smiled at her and pulled up a chair beside her bed. “How do you feel, Julie?”

“What happened to me?

“You were in a car accident on your way home from Idaho City yesterday afternoon.

“I remember leaving from Idaho City, but I don’t remember an accident. But why can’t I move or feel anything?”

“You were thrown from the car in the accident, and your back was broken between the seventh and eighth thoracic vertebrae. That’s between your shoulder blades.”

What does that mean, though? Will I ever be able to walk again?”

The doctor sighed and looked troubled. “We did some surgery to clean out the bone fragments and get a look at the cord. It’s pretty badly damaged. What your injury means functionally is that
your abdominal muscles and legs are paralyzed. It’s unlikely that
you’ll walk again, at least without braces and a walker. Even that
would be difficult. It wouldn’t be impossible for you to get some
return of muscle function, but it’s not very likely. Spinal cord
injuries are unpredictable, though, and you might surprise
everyone. You won’t have control of your bladder, at least not for
a while, so the nurse has put a catheter in. I know this is a lot to
be throwing at you at once, but people usually take things better
if they know what’s going on than if they have to wonder.”

Julie stared blindly out of the window, hoping that it was all a
dream. At the same time, she knew with a sinking feeling that it
hadn’t been a dream and that no amount of hoping would change
what had happened.

When she looked back into the room, the doctor was gone.

The three weeks in the hospital were the longest Julie could
remember. The only breaks in the monotony were when she was
taken periodically for x-rays or other tests. She spent most of her
time reading without much interest or talking to her visitors. At
the end of the third week, she was transferred across town to
Elks Rehabilitation Center.

As Julie lay on a gurney outside of the medical director’s office
waiting to be examined, she heard a buzzing sound coming toward
her down the hall. Twisting around, she saw a teenager in an
electric wheelchair coming toward her. She couldn’t help staring at
him. His head had been shaved, but his hair was starting to grow
back. His torso and abdomen were encased in a body cast,
partially covered by a loose warm-up jacket. Four vertical metal
rods cemented in the body cast were attached to four short horizontal rods embedded in his skull. His wheelchair drew up beside her and the buzzing stopped. “Hi, my name is Eric. You must be Julie.”

“Yes, how did you know?”

“Sam told me that a new paraplegic named Julie would be coming over from St. Al’s today. Sam is one of the occupational therapists. You’ll probably meet him at lunch. I gotta go to mat class now. Irene will yell at me if I’m late again. See you at lunch. ’Bye now.” With that, Eric buzzed on down the hall.

After he left, Julie thought about him. She hated having the word “paraplegic” applied to her. She didn’t want to think about it at all. She wondered how Eric could smile so much. Looking back over the previous three weeks, she realized that she had rarely smiled or laughed. Though she had tried to forget the situation, it had never been far from her thoughts. Here, she realized that she would not, during one waking hour, be able to forget that she was paralyzed. Everything would remind her—the wheelchair waiting for her back in her room, her efforts to overcome her disability, the reactions of other people. Every day would be a struggle, and every day she would deal with other people’s pity, because in a culture that valued strength and independence she would be weak and dependent. For the first time since her accident, she realized what she would be up against, and, turning her face toward the wall, she cried.

After she had seen the doctor, the nurses’ aide took her back to her room, dressed her, put her in the wheelchair, and wheeled her
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down to the dining room. When Eric caught sight of her, he waved awkwardly. The aide placed her across the table from him and next to a quadriplegic with red hair and a bushy red beard.

“Dave, this is Julie. She’s the new para that Sam was telling us about.”

Dave turned his head and smiled at her. “Nice to know you. Leave it to Eric to meet the first female under fifty we’ve had here in the past two months.”

“Well, almost. Are you from Boise?”

“I grew up here, but I’ve been going to school at the University of Oregon the past few years. I’m a grad student in linguistics.

Further conversation was interrupted by the arrival of the lunch trays. Sam, the occupational therapist, came shortly after the trays did. He introduced himself to Julie before turning his attention to Dave. Sam put a cuff around Dave’s hand and fit a spoon into it. Julie watched Dave feed himself out of the corner of her eye. He scooped the peas against the plate guard and brought the spoon unsteadily to his mouth. Eric wore a brace to keep his wrist extended and a cuff like Dave’s with a spoon in it. Eric couldn’t get the spoon all the way up to his mouth, so Sam would put his hand under Eric’s to support it the last few inches. The effort was painful and tiring for Eric, and with each successive bite, he needed more help. Watching him was almost more than Julie could bear. When Eric could no longer lift the spoon more than a few inches off of the plate, Sam took off the brace and cuff and fed him the rest of his lunch.
Later that afternoon, the department head from physical therapy visited Julie. After introducing himself, he told her that Irene would be her physical therapist, and that she should come to the PT clinic the next morning to get her schedule.

Since Eric and Dave were in their classes and she had not met any other patients, she didn’t know what to do with her time. Wheeling herself around the ward, she found the patient lounge and library. Looking over the titles within her reach, she noticed a copy of *Roots*, the story of an African man who was kidnapped into slavery, and took it down from the shelf. She was soon absorbed in the story of Kunte Kinte’s birth and early childhood.

Concentrating on the story before her, she didn’t hear the wheelchair approach until it was within less than three feet, She looked up, startled. “Oh, you scared me!

The quad before her smiled and said, “Sorry, I didn’t mean to. My name’s Peter. Are you Julie?”

“This place has an amazing grapevine, doesn’t it?”

“One of the best. I just talked to Dave down in OT. He told me that there was a new para admitted today, but he didn’t tell me that she was so beautiful.”

The compliment sounded so sincere and guileless that Julie decided to overlook the fact that it was inaccurate. “Thank you.”

“Are you a patient here? I didn’t see you at lunch.”

“I came about six weeks ago, but the past week, I’ve been over at St. Luke’s recovering from pneumonia. They just transferred me back today. Oh, I almost forgot. I’m supposed to meet Dave and Eric in the dining room for coffee. Would you like to join us?”
“No, I don’t think so. Thanks anyway.”
“Actually, we need someone to pour the coffee.”

Julie hesitated. She didn’t want to identify herself with disabled people, but it wasn’t any fun sitting alone and reading, either.

Julie and the three quads, who called themselves the quad squad, spent the hour before dinner drinking coffee and talking. They made jokes about the frustrations of therapy and told her funny stories about staff members, other patients, and each other.

After dinner and visiting hours were over and Peter, Eric, and Dave had gone to bed, Julie sat alone in the lounge watching the sun set over the trees across the street. She thought about the three quads, and she realized that she had joined an exclusive fraternity in having her accident—the young and disabled. Because she had experienced many of the same things they had experienced, or she would soon, they accepted her as one of them. No one who hadn’t been through it could understand how it felt. She marveled at their ability to laugh at their situations—to laugh at all. It seemed to her that it was another lifetime when she had enjoyed living so much, when she had enjoyed parties and funny movies, when she had been excited about the future.

The next morning shortly after 9:30, Julie wheeled herself into the PT clinic. The walls of the large room were lined with exercise tables and equipment. A small, brisk woman approached Julie.

“Hi. I’m Irene. You must be Julie Stewart.”

“Yes, I am.”

“This is your schedule,” she said, smoothing a wide piece of adhesive tape onto the arm of Julie’s wheelchair. “I have you for
PT right now. Go over to one of those tables and I'll be over in a minute.

Irene and one of the PT aides lifted Julie onto the exercise table. “I'm going to do some range of motion on your legs first,” Irene said, starting to flex and extend Julie’s right hip and knee. “Your muscles don’t have any tone at all now, and they'll shorten if we don’t keep them stretched. In a few weeks, you’ll start having spasms in your leg muscles.” Irene continued to work while she talked. She started manipulating Julie’s right ankle and Julie asked questions about herself. She answered as succinctly as she could without being rude. Irene’s abrupt manner made her uncomfortable. Julie already knew that Irene had a reputation for yelling at patients, usually in an effort to get them to work harder rather than in anger. While Eric, Dave, and Peter weren’t really afraid of her, Julie gathered that they did their best to avoid being yelled at. Julie also gathered that it wasn’t easy.

As Irene walked around the table to work on Julie’s left leg, she said, “After I finish ranging, I'm going to do some manual resistive exercises on you. That’s where I push and you pull, or vice versa. You also have a progressive resistive exercises class scheduled. You'll use weights for that. I want to get your upper extremity muscles built up so that you can transfer and wheel your chair for longer distances and so on.” Irene rested Julie’s leg on the table gently and then bent Julie’s arm. “OK, now I want you to push against my hand.” Julie did. “I said push. You’re not pushing.”

“I am.”
“Well, then you’re as weak as a cat. Come on push. OK, relax. Now push again, and this time try to act like you mean it.”

When the session ended fifteen minutes later, Julie was exhausted and angry, though she tried not to show it. After Irene and the aide lifted her down from the table, she wheeled herself out of the clinic, and, once out of Irene’s line of sight, she stopped to rest her tired muscles.

Julie’s days fell into a routine of classes which included, besides exercise three times daily and range of motion, exercising on the floor mat, standing board, transfers, and occupational therapy. In OT, the aide was teaching her to dress herself, but, like everything else, it was difficult and discouraging. She wasn’t motivated, and her progress was slow. The first weekend she was at the rehab center, Peter and Dave went out on passes, Dave to his home and Peter to a friend’s house. Eric slept a lot, so Julie was left on her own. Bored, she forced herself to read. Much of her time she spent in her room listening to her Neil Diamond albums. The pensive mood of the music appealed to her frame of mind. The sexual allusions in some of the songs started her wondering again about making love now that she was a paraplegic. Would she be able to? What would it be like? Would anyone ever want to make love to her now that she was in a wheelchair? “If I were a guy,” she thought, “I wouldn’t want a girl in a wheelchair. She wondered who she could ask about it. Irene would be likely to know, but Julie didn’t feel comfortable enough with her. She felt comfortable with Peter but didn’t think that he’d know what she wanted to
Julie's mother spent some time with her that weekend. Between working full time and taking care of her house and Julie's two younger brothers, Emily Stewart had little time to spend with her daughter. The visits were often uncomfortable, anyway. Emily never seemed to know what to say. Julie realized that her mother was going through a difficult time of adjustment but didn't know how to help.

The following Monday morning between her classes, Julie was sitting in her room reading and listening to music when Mrs. Allen, the social worker, came in. Julie and Mrs. Allen had met briefly before but hadn't talked in depth. "I'd like to talk to you for a few minutes. Are you busy?"

"No, not really." She turned the book face down on her bed as Mrs. Allen pulled up a chair.

"Julie, have you thought about the future at all? I mean like what you're going to do when you leave here?"

Julie hesitated for several seconds "I haven't thought too much about getting out. I don't think about the future when I can help it."

"Well, off the top of your head, what would you like to do? Do you want to finish your degree?"

Julie thought about that and then said slowly, "Once I thought it was important for me to earn my PhD so I could teach other people to be as excited about linguistics as I was. Now I don't even care. I don't want to think about the future."

"What if you changed your major? Is there anything else you'd
like to do?”

“I used to be interested in almost everything. Not any more.”

Mrs. Allen waited for her to go on and then said, “You can’t stay here forever, even if you want to. What about getting a job until you decide what you want to do?”

Julie made a wry face and shrugged without commenting.

“Listen to me, Julie. You’re a woman with a lot of assets. You’ve got a good mind, you’re young, and you have your hands. A lot of people who come through here don’t have those three things. If you’d stop comparing what you can do now with what you used to be able to do, you’d realize just how much you have going for you. I know you haven’t been here long, but if you don’t start working with some motivation, you’re going to spend the rest of your life in your room listening to sad songs.”

Julie felt anger flare up inside of her, “Who the hell do you think you are, anyway! You can walk out of here tonight. You don’t know what it’s like, so don’t sit there and tell me what I can and can’t feel. I’ll feel whatever I damn well please!”

Julie grabbed the nearest small object, which happened to be the paperback copy of Roots, and hurled it at Mrs. Allen. In her blind anger, her aim was off, and the book only grazed her arm before slamming into the wall.

Mrs. Allen stood up slowly, looking to Julie’s surprise, neither angry nor offended, and Julie realized suddenly that Mrs. Allen cared and wanted to help. That, Julie supposed, was as close to understanding as someone who wasn’t disabled could come.

Mrs. Allen said, “We’ll talk about it again sometime, if you
like,” and turned and walked out of the room.

Julie wheeled slowly into the small bathroom that connected to her room and looked at herself in the mirror. There was no anger on her face. Now she only looked sad. She tried to smile at herself, but the smile looked out of place. “Mrs. Allen’s right,” she thought, “but I can’t help it. It’s easier to think of what I can’t do than what I can do. So is it even worth it? Do I want to live like this for the rest of my life? The direction of her thoughts shocked her, and, terrified of being alone, she wheeled quickly out of her room and down the hall to the gym where other patients were exercising.

Later in the week, Julie and Peter had coffee together in the dining room. “I remembered the hand lotion today,” Julie said, taking the small bottle from the side of her wheelchair. She squirted some on the palm of her hand and rubbed it into Peter’s chapped hands. “Do you want a cigarette?”

“I been dyin’ for one all morning, but you’ve been busy,” he said. “What will I do without you after you leave? I’ll never find anyone as sweet or as beautiful, either.”

Julie only smiled, accustomed to his outrageous compliments. She took the lighter and pack of cigarettes out of his shirt pocket, fished out the last cigarette, put it between his lips, and lit it.

“I’ll get you another pack at the nurses’ station in a few minutes. She took the cigarette out of his mouth and rested it on the ashtray. “I don’t know why I do this. You know you can do it yourself.”

“You’ve got a soft heart, that’s all.” She let him take another
puff on the cigarette, and he continued. “You know, it occurs to me that the more you demand of a relationship, the longer it will last.”

“How do you figure that?”

“Well, if you ask a lot from the other person and give a lot in return, both of you have a greater commitment to the relationship than if you didn’t make demands, so the relationship lasts longer.”

“That sounds logical.” Julie wanted to tell him that he gave her far more than he asked of her, but she didn’t know how, so she changed the subject and asked a question that had been on her mind the previous few days. “Have you ever thought about suicide?”

“You’re not thinking about it, are you?” he asked, alarmed.

Julie was touched by his concern but sorry that she had burdened him with her problems. “No, not now. I thought about it Monday, though. I was just wondering if things ever get any better. I mean, do you ever get used to it?”

Peter thought about that before answering. “Right after my accident, I couldn’t move anything at all below my neck. I couldn’t even feed myself, and I thought I never would. If I could have killed myself then, I would have. After three or four weeks, my arms started coming back. I was in and out of here for the next three years and eventually learned to do most everything for myself. Linda left me a few months back, and that was another really rough time. So in answer to your question, yes and no. Some days you’ll come close to forgetting that you’re paralyzed. Other days you won’t be able to think about anything else.
There'll be a room you can't get into or someone will unintentionally be rude to you or something. Sometimes you'll realize what a miracle just walking was, and you'll feel like you'd give anything just to do it again. It's not easy, but over the years the bad times will get fewer and farther between. So hang in there, OK? You'll make it.”

Two weeks later, Julie went home for the weekend. Saturday afternoon she and her mother went shopping for clothes. It was a golden fall day, and Julie felt closer to being happy than she had since before her accident, even though she was nervous about being in public for the first time in a wheelchair. She wondered how people would react to her. With a little help from her mother, she transferred out of the car and waited in front of the store while her mother parked.

Once inside the store, Julie insisted on wheeling her chair instead of being pushed. She didn’t want to appear more handicapped than she was. She discovered that the aisles between the racks were too narrow for her to turn around, so it took a long time to find two blouses she wanted. She felt the nearly happy mood begin to drain away. Whenever she turned her head suddenly, she would catch another shopper staring at her. After choosing the blouses, she discovered that she couldn't get her wheelchair through the doors of the fitting rooms, so she had to try the blouses on over the one she had on. She decided to buy them and waited on the other side of the checkout stands while her mother paid for them. People walking by on either side of her were too polite to stare at her openly when she could see them.
Julie noticed that, while they carefully avoided looking directly at her, they couldn't seem to resist looking at her out of the corners of their eyes as they went by. She hated them for it, knowing that none of them saw her as a human being. “I'm just an extension of this wheelchair,” she thought.

A middle-aged woman glanced casually in Julie’s direction. Catching sight of Julie, she stopped in her tracks, and her mouth dropped open in surprise, “My dear, what happened to you?”

Julie felt speechlessly angry. Unable to respond to the woman’s callous curiosity, she whirled her wheelchair and wheeled through the propped-open door. Outside, she brushed her tears away angrily.

The next afternoon when Julie's mother suggested the possibility of shopping again, Julie declined. That night, she was relieved to return to the sheltered environment of the rehab center. She wondered how she would ever learn to deal with other people's reactions to her. She didn’t think she could face it. Not for the rest of her life. Maybe that was the worst part—knowing that her disability was a life sentence.

At six o'clock the next morning, a tired aide woke Julie up. She wished she could lay there a little longer, but she knew that if she didn’t start getting dressed, she would be late for breakfast. She worked her way up onto one elbow and then the other. She straightened her right arm and then her left one and walked her hands forward until her shoulders were in front of her hips so that she could balance herself without the help of her hands. Julie
pushed the light covers back and looked at her legs. They were long and starting to look emaciated as her leg muscles atrophied. She picked up her leg bag and strapped it to her calf. She clamped off her catheter tube, unhooked it from the bedside unit, and connected it to the tube of the leg bag. She pulled her nightgown over her head so as not to lose her balance and then picked up her bra and a light green blouse and put them on slowly. As she finished buttoning the blouse and reached for her underwear and tan corduroy pants, she lost her balance and flopped back onto the bed.

She lay there gasping until her breathing quieted, knowing that the most tiring part was yet to come. She again labored to a sitting position and, leaning forward, pulled her right ankle up to rest on her knee. She pulled her underwear and trousers over her foot and up to her knee. She straightened her right leg and bent her left hip and knee and slid her left leg into her clothes. With a sigh of relief and fatigue, Julie leaned back on her elbows and then gradually lowered herself to her back. Without stopping to rest, she rolled to first one side and then the other pulling her clothes up over her hips. When they were pulled up, she laid back and buttoned and zipped her pants.

She worked her way tip to a sitting position again and slid into her wheelchair. After unlocking the brakes, she backed the wheelchair away from the bed until her heels rested on the edge of the bed and then, holding onto the back of the chair with first one hand and then the other, she swung the footrests into place and carefully lowered her bare feet onto them. Julie reached back
and took the arm rest, which had been on the left handgrip and put it in the brackets on the right side of the wheelchair. Taking her shoes and socks from the right side of the bed, she leaned forward and put them on.

Only then did Julie allow herself to look at the clock. “Not bad,” she thought. “Thirty-five minutes. Five whole minutes off of Friday’s time.” It was a sense of accomplishment, almost one of triumph. She ran a comb quickly through her dark hair and wheeled down to the dining room where the three quads were already waiting.

That afternoon, Julie sat out on the patio and watched absently as the high school football players practiced across the street. Their red jerseys were splashes of color against the dying grass and the brown hills beyond. She remembered vividly what it was like to run barefoot across a grassy field, and she ached for the sensation of her muscles moving, of the prickly grass between her toes, of being free and alive.