
AND THE LAME SHALL WALK

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In 2005, I read Tracy Kidder's inspiring book about Dr. Paul Farmer, *Mountains Beyond Mountains*. An infectious disease specialist, Farmer was a bold visionary who built a clinic in Haiti when he was still a student at Harvard Medical School and then went on to found Partners in Health, a leading global health initiative. He believed that every individual deserves the best care, no matter the circumstances. He broke all the rules. He believed in God. In contrast, I was a middle-aged gynecologist living in suburban Boston with my husband and two teenage daughters. I liked hot water showers and a comfortable bed. I was not selfless, a visionary, a rule-breaker, or a Christian. Raised by devout atheists, I did not believe in God. In other words, Paul Farmer was not the kind of doctor I could realistically aspire to be.

But Kidder's writing was powerful. I started working in free evening clinics set up in a local church and synagogue. I treated mostly immigrants. My patients waited for hours to see me. God took up substantial real estate in their thinking and supported them through terrible trials. They blessed me at every opportunity.

One evening a refugee from Uganda came through with a minor gynecologic complaint. It was a slow night, and we spoke for a long time. She'd been arrested, tortured, and raped and had escaped to the United States with almost nothing. But she spoke about God as if he were sitting in the chair right next to me. The woman wrote a letter to the clinic chief and told him how much our conversation meant to her and that she was sure God walked with me, for how else could she explain my kindness?

Soon after, I decided I would go abroad but only if I could find a position where I wouldn't be in charge and where I could be mentored. One of the organizations I worked with matched me up with Dr. Justus Hofmeyr, a professor of obstetrics and gynecology in the Eastern Cape, a province in South Africa. But at the last moment, my medical license hit a snag. The bureaucrat handling my case had held it up because she lacked an official translation of my college diploma from Latin into English. Dr. Hofmeyr said I couldn't care for patients without the proper credentials.

So, on my first trip in 2008, I ended up on the maternity ward of a former Black African hospital in Port Elizabeth, where the department head was less concerned about my papers. The hospital was named after the wife of a Zulu chief, one of the first Black African nurses. Her namesake was connected by vast, snaking hallways. Wards were crowded, the staff was overworked, supplies were short, cleaners didn't clean, and there were no phones or computers. Half of the hospital didn't even have a cell signal. You could get mugged on your way from the casualty department to the ladies' ward. After a week, one of the staff physicians was out on a bender, and I ended up being responsible for his ward.

The AIDS epidemic was out of control on the Eastern Cape. The South African government didn't believe the disease was caused by a virus and delayed while millions were infected. The HIV positive rate among pregnant women in our hospital was close to 40 percent. The maternal to child transmission rate greater than 20 percent. Even once the treatments became available, patients had to wait a long time to get on the new regimens. Overwhelmed by the numbers of infected women, the guidelines in the province only allowed for treatment of pregnant women if their CD4 counts were below 500; normal levels ran in the thousands. A physician had to attest she had another complication of the disease, such as oral thrush, in order to start antiretrovirals. You couldn't perform a routine Cesarean section for HIV, as would be routine in the United States and private hospitals in South Africa at the time. All this left the door open for the virus to continue to infect the next generation.

We rounded daily through cavernous wards. Many patients sat on bare plastic mattresses because they couldn't supply their own sheets. In the makeshift isolation room, a woman with HIV and likely cryptococcal meningitis fixed a cross-eyed stare on me each morning. Her sons floated in

her womb, still growing, trying to catch hands. Outside the dusty windows, weavers swooped and perched on coral trees. The sleep-rumpled interns barely glanced at the woman when they gave their report.

“Twenty-year-old gravida, twenty-two weeks, with twins. Demising.”

But there were good moments. Nurses and patients were appreciative. The small medical staff and the doctors in training were a smart, dedicated bunch and were facile in physical exam and diagnosis. Their knowledge of medicine was encyclopedic. They worked without the support of radiologists or imaging other than bedside ultrasounds and X-rays they performed and read themselves. The nurses sang hymns on the wards each morning. Their harmonies wove a new pattern each day.

There was God again, in case I had forgotten about Him.

My organization provided me a three-bedroom apartment in town. I lived alone, with bars on the windows and doors. I finally got up the nerve to rent a car. Carjacking was pretty common, and you could get your throat slit for a few rand and your cell phone. The interns told me to drive through stop signs and red lights if I had to drive at night. They told me not to pick anyone up, even women or old people.

“You pick up some harmless granny,” they said, “and her son could be waiting to ambush you from behind a bush.”

Toward the end of my visit, Justus Hofmeyr called. He explained that he lived in a rented apartment near his hospital in East London during the week but that on weekends he went home to the tiny village of Hamburg in the former Black African homeland of Ciskei, where he and his wife had a home.

“Carol is a pediatrician.” Justus told me. “She runs a small HIV treatment center here. She’s hosting a conference on pediatric HIV for the local players this weekend. You could attend.”

It was a sunny day when I made the two-hour trip up the coast from Port Elizabeth to Hamburg. The beauty of the scenery was a painful contrast to the poverty and disease imbedded in the daily lives of villagers living along the rutted dirt road that leads down from the highway to Hamburg. Wheat-colored hills rose and fell, and the Keiskamma River snaked in and out of view below and then beside me. I decided to ignore the interns’ advice

and pulled over to offer a ride to a couple of women walking the road. I didn't see any bushes that could hide an attacker.

The women didn't speak or smile. They folded into the back seat leaving the front seat empty. They wore the traditional garb of the area, colorful cloth wrapped and pleated around their bodies and head scarfs intricately stacked so that they touched the roof of the car. I signaled to them to fasten their seatbelts, which elicited shy smiles but no compliance. After dropping them by a dirt pathway after the turnoff for Bodium, I noticed a white stucco wall with colorful mosaics of people and animals.

As instructed, I pulled up a few houses after the backpacker's lodge and parked near the treatment center, its outer walls decorated with more mosaic work. The brick community house was a simple structure on a rise above it. I rolled down my window. Even though the Indian Ocean wasn't visible, the roar of its waves was clearly audible. I was immediately greeted by Unathi, who introduced herself as an administrator and cook for the Keiskamma Trust. She had wide eyes, smooth skin, and a broad smile. Slung to her back was a sleeping baby. African Madonna and child—that's what passed through my mind.

"Are you tired?" Unathi asked in a melodious voice.

"Not at all," I answered.

Unathi slid into the passenger seat and a small boy, with short dreadlocks and Unathi's eyes stamped on his face, slipped out of nowhere into the back seat.

"That's Neo, my oldest," she said. Neither of them fastened their belts.

Unathi directed me a short distance to a small motel overlooking the Keiskamma at a point where it broadened. She led me into a unit with a kitchen, living room, and three bedrooms, the largest of which had a king-plus bed that could easily sleep a family of seven. The apartment was simply furnished with picture windows looking out to the river. A pelican perched on a tree beyond the terrace and a goliath heron, tall as a man, waded in the river shallows.

Unathi helped me bring in the groceries I had brought down from Port Elizabeth.

"Is this apartment all for me?" I asked.

"I wanted to ask you about that," she said. "I have ten nurses in the two

bedroom next door. Could a few of them have rooms in here? I don't want to impose."

"Of course," I said. I moved my bags into the smallest room. I would return later that day to find my suitcases in the largest bedroom, my seven roommates having crammed themselves into the smaller two.

I awoke early on my second day. The sky threatened rain. I put the electric kettle on to boil, made myself a cup of sweetened tea, and walked onto the terrace. Wanting to be alone, I was disappointed to find one of the nurses sitting there with her bible.

"Good morning, Doctor," she said. Grace had a plain face, and her glasses shrunk her eyes, but her dimples made her look as if she were lit from within.

"Tea?" I held out my cup.

"Thank you, Doctor." She reached for it, balancing the open book on her lap.

I went back to the kitchen and made another cup but decided I would drive the mile down to the beach to drink it in solitude. But when I slipped behind the wheel, I found Grace in the passenger seat with her bible.

"May I join you, Doctor? I like to read scripture while facing the sea." She held a hand out for my tea. We drove in silence past shuttered holiday homes. Egrets tight-roped the barbed wire atop the high walls that surrounded each villa. Monkeys careened in our path. The rough parking lot at the end of the road was settled among two-story dunes. The crashing of the waves beyond was deafening.

I left Grace with her bible and my tea on the ruin of a concrete jetty and walked toward where I sensed the Keiskamma must run into the sea. It was windy, and the water roiled and darkened into every shade of grey, black, silver, and brown. It was a different palate from the sunny turquoise and white I would become used to. For a moment, I mistook the giant waves on the horizon for distant mountains, until I saw they were moving. Black boulders were buried and unburied, and the cacophony of water hitting sand and rock reminded me of an orchestra endlessly tuning but never turning melodic.

The Keiskamma cut a deep trough in front of me, and beyond it the dunes went on and on. The river current was no match for the waves cresting

high and crashing onto the hard sand, waves traveling from India or maybe even reverberating from the New World across the Pacific. Turning back, the beach stretched in a bleak line to infinity. Where was God? So absent and yet so present.

I suddenly thought of my father, who had died a year earlier. I missed him in a way that wasn't unlike this empty, endless beach. When I was a child, he would pull the lamp shade off the lamp on my bedside table and hold apples and oranges up to the bare bulb to show me how the moon could eclipse the sun. He once tried to explain infinity to me. "Take the biggest number you can think of. You can always add one more."

When I circled back to Grace, she looked up at me with her plain face, almost beautiful in that light. It was then I noticed how her cheeks collapsed while her stomach was quite rounded. I wondered if she were infected, as these features were stigmata of the drugs used for HIV treatment.

"How was the walk?" she asked.

"Fine."

"God is with you every step," she said.

I didn't answer. I untied my rain jacket from around my waist and put it back on. I hadn't realized that Africa could be so cold.

"Let me take your picture," Grace said. She pulled a diminutive Motorola out of her pocket and snapped. She held the phone up to me.

I squinted at the screen. I looked like my eldest daughter.

"It's good," I said.

Grace picked up her bible and the empty mug and walked ahead of me to the car.

"Let me read a passage to you from the Book of Matthew," she said.

"It's okay," I said. "I prefer to be quiet in the mornings."

"The words are beautiful."

I didn't answer. My mother had been raised in the Anglican church, but she gave it all up when she married my father, a Jewish refugee from Vienna who had lost most of his family in the Holocaust. When I was growing up, any talk of a "great being" overseeing the sorrows of the world would have been scoffed at.

"Are you a Christian?" Grace asked.

My mother's clipped Canadian speech came to me. "Religion isn't something one talks about," my mother would say.

"Where I come from, we don't ask that question," I said.

"Why not?" Grace's voice was frankly curious.

"It implies judgment, don't you think?"

"No. No judgment."

I pulled the car key from my pocket. "Shit," I said.

"What, Doctor?"

"I must have dropped my license out there," I said.

"I'll pray God finds it for you," she said.

The conference took up the rest of the day. From what I could understand there were different factions, mostly religious, who had carved out territory for treating AIDS in the district after the President's Emergency Plan for AIDS Relief (PEPFAR) was started under President George W. Bush. Justus Hofmeyr's wife, Carol, worked hard to find common ground over the course of the day, but it was difficult. I went out for a break after one of the sessions. I stood with the nurses who shared my apartment, Grace among them. A teenage boy approached shyly.

"I found this on the beach," he said, holding out my license. "Is it yours?"

"Praise the Lord!" Grace said. I thought her smile looked triumphant.

That evening Carol and Justus invited me over for dinner. I drove down the same road from the walk that morning and parked below their house. The rusted gate was propped open and the steep walk was lined by beach roses. The invisible ocean crescendoed and decrescendoed. Once through the gate up to the patio, I was rushed by two enormous mutts, their fur matted with sand, both smelling a bit like rotten fish. Their coats were somewhere between burnt cinnamon and tan, which seemed to be the standard colors for African strays. They spun around me silently, then one of them took my hand gently in her jaws and lead me to the door. A preposterous view toward the river and hills surrounded me.

Justus came to the screened door in a pair of running shorts and a worn T-shirt. He reprimanded the dogs, calling them by their Xhosa names, incomprehensible to me and full of the clicks and clucks of the local dialect. "Jealous and Careful," he said, "in case you want to call them in English." Jealous let go of my hand, and both dogs lay down in a corner of the lanai.

Justus held the door open. He wasn't a tall man. Muscular and lean, his greying hair was in need of a trim. "The dogs are a bit intimidating but

pretty harmless," he said. "The cleaning woman left them here one day, and they've stayed on ever since."

A small dining table was set for the three of us. The kitchen was very simple with an ancient refrigerator held closed with duct tape. Five shirtless teenage boys sprawled on worn couches in the living room watching a suggestion of a soccer game on a snowy television screen. The picture windows with the view up the coast to the river mouth were mine alone.

"Our boys are grown," Justus said. "These are neighborhood kids. Friends of our adopted son. They hang here during school break."

Carol joined us. She wore her grey-white hair in a bob and the dress she'd had on for the conference. She seemed weary but perked up over a chicken stew with vegetables that appeared out of nowhere. She had penetrating blue eyes. She was the kind of person who listened, and I was pleased whenever I could get her to crack a smile.

Carol and Justus were white South Africans from Johannesburg. She had trained as a developmental pediatrician but was never happy with medicine. She cast around, studying literature and psychology and raising their two boys. When Justus went to Oxford for a year, Carol took some art classes and found her true calling.

In 2000, they bought this dilapidated house. Other white families built summer homes with high walls and electric gates, but Carol and Justus never got around to that. Carol opened an artist's workshop in the village, starting with embroidered goods. The workshop grew to more than one hundred workers. Carol's group created large mosaics, tapestries, and altar pieces. One of their most famous works was the Keiskamma Tapestry, which told the story of the Xhosa people from the beginning of time through colonization, apartheid, and the end of apartheid. Originally planned at 75 meters, the Keiskamma Tapestry stretched to 175 and now circled through the hallways of Parliament in Cape Town.

Over time I would learn that Carol was the inspiration behind all the art pieces as well as other "good works" within the village, such as the work details who cleaned the trash off the beach every few days and the rebuilding of the mission school as a museum with the wall of mosaic work I had seen on the way in. Her leadership in these projects was never acknowledged. She was always listed as a "contributor."

"The highway from Port Elizabeth provided the route for AIDS to

arrive in Ciskei," Carol told me. Black African men left to go to the mines to find employment. They returned and infected their wives. Lorry drivers coming up the coast slept in brothels, one of the few places of employment after white farmers left the region. Soon after the Hofmeyrs settled in Hamburg, the virus emerged from its silent incubation. Villagers went into the earth in Hamburg's hillside cemetery on a weekly basis.

Carol raised money from summer residents and her friends in Johannesburg and Cape Town. She bought the drugs but then had to come out of the closet as a physician, as otherwise there would be no one to treat the victims. That was how Carol ended up being the only doctor providing care to those in need across most of the southern portion of Peddie District and beyond.

On my second trip to South Africa, in 2009, I visited Hamburg first. My license had come through, and I was supposed to leave after a few days to work with Justus and a colleague doing HIV prenatal care in East London. But the Canadian nurse who assisted Carol in the treatment center had left for the weekend and hadn't returned. I volunteered to stay on for a few weeks until they found a replacement.

Carol and Justus put me up in their guesthouse below their home. The one-room cottage was made of discarded housing materials. Whole albacore shells paved the way down to my new bedroom, and the mother-of-pearl shattered no matter how carefully I stepped. I suspect Carol reworked the path every few days with replacements I harvested on daily beach walks with Unathi's son Neo, and the two dogs Jealous and Careful. The shower and toilet were on the back porch. Perched there I could see whales breaching. The roar of the waves and bright moonlight through my window sometimes woke me at night. Drifting off again under mosquito netting, I thought about my father again.

When he was growing up in Vienna, my father had been extremely poor. But he had a large extended family who supported one another. When he was thirteen years old, an uncle had helped him purchase a set of Zeiss lenses, and my father used them to build a telescope out of a few lengths of pipe.

"We could see the craters of the moon and the rings around Saturn with that telescope," he told me. I wonder now if that was even possible.

In old age, my father began having nightmares about being buried alive and flashbacks of experiences during the Nazi takeover of Austria in 1938, Kristallnacht, and his escape to England. He began to talk more about his past.

After my father died, I'd found the lenses from his telescope in a box at the back of his closet. The tissue around each crumpled when I unwrapped them. I held them up to the light one by one. Time had clouded them.

Carol disappeared once I started work at the center, although I heard she showed up whenever I took a break. She rarely answered the phone when I called with a question. At first, I thought it was the unreliable cell service, but soon I realized she was avoiding me and was timing her check-in at the clinic for when she knew I'd left.

A few days in, a couple turned up for evaluation.

"I used to be fat and happy," the wife told me.

There was no irony in her statement. She and her husband had both lost more than fifty pounds over the past few months. They had been coughing, running high fevers, and waking drenched in sweat. The husband was less chatty than the wife. Kaposi sarcoma infiltrated the subcutaneous flesh of his emaciated limbs, and his legs were like gnarled tree trunks.

"I'm pissing blood," he told me.

Looking at their clinic booklets, the wife's last CD4 count had been under ten and the husband's under four. They were on a waitlist to get started on HIV treatment at their home clinic in Port Alfred, but the wife heard that Carol's treatment center had medications and that our health workers would train them quickly so they could get started on treatment immediately. So, she and her husband took the last of their earnings and taxied down the highway as far as Lover's Twist and walked the last ten miles of dirt road to reach us.

The diagnosis was obvious—tuberculosis. Waiting for confirmatory results would just delay treatment, and there wasn't much else that would cause them to lose weight at such a rapid clip. With HIV, their sputum wouldn't necessarily grow out the bacillus, and their chest X-ray and skin testing could be perfectly normal. South African nurses manning the rural government clinics had to wait for these results before prescribing antibiotics. As a doctor, I could just order the treatment.

I wasn't sure what was making the husband bleed, but he would have

to go up to the district hospital at Peddie because the blood could clog up his urinary tract, and we didn't have any catheters. The wife could stay in the garden shed for a few days while we got the TB under control. Once she wasn't contagious, she could move into the main house with the other women and children on the second floor. We'd start the training right away, but she wouldn't be able to start the antiretrovirals for a few weeks. An active infection like TB could trigger reconstitution syndrome if we started her on HIV treatment too soon. That could kill her.

I'd learned a lot in my first few days, but I was still overwhelmed by the complexity of the patients. The center wasn't a medical facility in the usual sense, even though our patients were sicker than anything that would be managed outside of my hospital in Boston. We had one ancient nurse on staff. We had no X-ray or ultrasound. The oxygen tank was long since empty and rusted shut. We had the basic triple therapy for HIV, TB medication, and a handful of antibiotics. On a good day, we had Panadol for fever or pain.

I was finishing up the charting when one of the clinic workers came in.

"A woman was found collapsed by a jitney up the road," he told me. "It's not clear if she was hit by a car. They're bringing her here."

"Why not the government clinic up the hill?" I asked.

"Because God has brought you here," he answered.

Soon, an obese woman wedged into our wheelchair was rolled to the door by one of the village health workers. The woman was dressed in Western clothes, a once-pressed shirt with sweat stains under her arms. Her edematous feet were packed into shoes that appeared two sizes too small. She was slumped over—the idea of a severed spinal cord passed through my mind. Her head flopped back when the worker pushed her into the room, followed by most of our staff.

The woman wasn't bleeding. Her mahogany brown skin wasn't bruised. She didn't respond when I spoke to her and seemed to stare past my left ear. Perhaps she had seizures and was simply postictal? In the dim light, I noted her pupils appeared equally dilated. When she was pushed toward a window for me (we kept them open to decrease the risk of TB transmission), I was relieved to see her pupils constrict. Her irises were a startling turquoise rimmed by lapis blue.

When I looked up I saw that I was alone with the patient. The staff

must have thought I would be able to propel the woman safely out of the chair onto the exam table on my own, perhaps by some miracle of Western medicine or a divine intervention.

“Come back and give me a hand,” I called. I looked around for something to stabilize her spine, but before I could find anything, five of the men came in and hauled the woman onto the table. I prayed silently to no one. “Please don’t let her have a broken neck.”

One of the staff stayed and acted as a translator, although the woman didn’t respond to questions. I did a very basic neurological exam. The woman’s reflexes were asymmetric: very brisk in the right arm and leg and normal on the left. Meanwhile the worker went through the woman’s bag and found her medical notebook. Most of our patients carried these small school notebooks listing their doctors’ appointments and notes. I leafed through it. The woman was in her forties, although she looked older. She did have a long history of a seizure disorder. She had iritis that had left her partially blind. It said she had had a stroke five years earlier, leaving her paralyzed in one arm and leg, although it was the opposite of what I noted on her exam. I couldn’t reach Carol for advice. It would take hours to get an ambulance down from Peddie, and our drivers were off for the night. I took a gamble that she could stay in the treatment center overnight.

“I think she should stay on this floor, in the men’s ward,” I said. I couldn’t imagine dragging the woman up the stairs to the second floor where the other women were kept, dormitory style, in three small bedrooms. But I was overruled. The staff came in and hoisted the woman up the stairs and laid her down in one of the small beds, her sides rolling over the edges. Five members of her family, summoned out of nowhere, arrayed themselves on the floor around her.

When I returned the next morning, the staff all came to the door to greet me. They led me up the narrow stairway. I entered the woman’s room, and she waddled into my arms, beaming.

“Thank you, Doctor,” she said.

“For what,” I thought.

“For this miracle.”

You didn’t contradict hope here, or God, for that matter, who seemed to have a hand in everything. For the rest of my visit this cure I hadn’t actually accomplished hung over me. I was a miracle worker. There was little doubt

in anyone's mind, no matter how clumsy my ministering, God worked through me.

A week later, I lay in one of the iron beds with the girl who had been left with us by her Auntie the day before. Her mother had died of AIDS some years earlier. Her father was unknown. The girl was a girl in the daytime, playing with the younger children and accepting some mothering from the other patients. In the evening, she crumpled, her temperature skyrocketed, and she would lie limp in my arms. We'd started treating her for presumptive TB, and she improved a little, but her liver and spleen draped down from under her ribs into her pelvis, and I suspected some malignancy mushroomed there. She would need to go to East London for evaluation and treatment very soon, or we would lose her.

Nampalu, the patient in the next bed, laughed at me.

"Doctor, that girl is fine without you."

But the girl, with her slight shoulders and shy smile, reminded me too much of my own girls when they were younger.

Nampalu couldn't walk unaided. She was eighteen but looked about thirty. TB had settled into her spine and eaten out lumbar vertebrae four and five, collapsing onto the nerves feeding her legs. She'd graduated from a wheelchair to a walker, but her legs were still frozen into a stretched-out L that twisted to the right, ending with feet spasmed into a sharp comma at the end of her sentence. The drivers took her into East London three days a week for physical therapy, which seemed a hopeless proposition to me. But she kept at it.

Nampalu greatly admired one of my skirts.

"It would look much better on me," she told me one morning, when the girl finally broke her nighttime fever but was stretched out exhausted on the bed.

"Really," Nampalu said again. "That skirt's too short for you. It's better on me." I pulled a dress over my head and pulled off the skirt below it and handed it over. She pulled it on—red and white flowers down to her knees, and her shriveled legs seemed not to reach the floor but somehow looked to be floating.

"You're right," I said. "It does look better on you."

Later that day a text came in from Carol. She asked me to bring the girl

and one of the other children, a fourteen-year-old boy who looked about seven, down to the local bar, Josay's.

"We can treat them to a Coke," the message said.

I hadn't seen Carol at all for a few days, but her notes were still there, so she must have been in and out around my hours.

Josay's was run by an enormous Portuguese man who'd moved to Hamburg from Mozambique. He and his wife served cheap beer and spirits and, when the mood struck them, they would cook up chicken and fried potatoes. The smell would draw in the locals to this hut down by the river.

Josay wore shorts, and his plump legs were always covered in sores. When I had stared at his legs, Josay told me in his heavily accented English: "I'm afraid of African tick bite fever. I use Doom."

Ticks were ubiquitous on the tall grasses near the river and the ocean. They carried *Rickettsia africae*, which gave you fever, a severe headache, and a rash. It made you feel awful for a few days but was rarely fatal. I'd wondered if Doom was Josay's nickname for a popular home remedy, but later I realized it was under the kitchen sink at Carol and Justus's, used for spraying against cockroaches.

That evening it was just Josay and drinks. I bought cokes for the children and beer for myself. The kids sat on the steps together to enjoy this rare treat. I joined Carol at one of the tables on the wide veranda.

"How's it going?" she asked me.

"OK," I said. "I've missed you. I'd love to talk to you about some of the patients."

Carol took a sip of beer straight from the bottle and stared out at the children and the river. The setting sun accentuated the fine wrinkles around her eyes. "I'm very tired," she said.

I wanted to tell Carol how exhausted and overwhelmed I felt after only a week at the center. Carol looked directly at me.

"I'm so tired," she said.

I took a sip of my beer.

"You must think I'm kind of a fraud," Carol said.

"How could you possibly think that, Carol?" I said. "What you have accomplished here is nothing short of amazing."

She hunched over. There was a long pause.

"I'm trapped here," she finally said. "I don't want to do this anymore."

I really just want to do my art. But if I take a weekend or even leave for a few hours, people die." She looked at me again. "And I can't get away from people here unless I hide. I can't even go to my own house without someone showing up." She took another sip. "We're working on another altar piece. The village workers always want God in these pieces. But where is God? It's like a tsunami here every day. And no one cares. When I first came here, people were going into graves every day. Now they are living, but if I leave, they won't live very much longer." She took another sip and sighed. "I want to do the *Guernica*—you know, Picasso—the woman with her arms raised to God or just the sky, the silent scream and the bombs falling all around her. That's me. But the village workers would never do anything so bleak."

"Maybe you could do it on your own? A painting maybe?"

"It's a thought," she said. "But I have to admit, the idea of doing something by myself terrifies me." Carol looked at me again. "I've appreciated having you here, even for such a short time. I've been able to let it go just a little. Thank you."

"You're welcome. I'm sorry I can't stay longer."

"I understand," she said. "You have your own life."

After that meeting Carol and I began to overlap at the treatment center. She called me over after rounds one morning. "The district hospital just phoned," she said. She indicated the woman whose husband I'd sent up to Peddie for gross hematuria. The wife was talking animatedly with a young woman who'd come in around the same time. The young woman had barely talked and never smiled when she'd first arrived. Hers was another sad but typical story. She was a newlywed, pregnant, but when she tested positive for HIV, her husband and mother-in-law threw her out of the house. The young woman had been silent for the first week, and we'd been worried she might harm herself. But she blossomed at the home, becoming a kind of leader and comfort to her sisters.

"The husband died," Carol said.

"How?"

"They didn't give any details."

"I'll tell her."

"No. Here it's different. You only get this kind of news from family. You need to tell her we are taking her up to Peddie to see her husband. Tell her to pack all her things in case she stays overnight."

“But she will know something is up, won’t she?”

“Perhaps. But it won’t be real until her family tells her. They will meet her at the hospital.”

I took the dogs out for a walk my last evening in Hamburg. The setting sun gilded the dunes and the tops of each wave. Careful tore off down the hard sand.

“Careful! Come back!” I shouted.

Jealous dropped my hand to chase a flock of seabirds along the shore, making them explode into the sky. Stars appeared as the blue deepened.

My father would map out the constellations for me on evening walks around the neighborhood. We talked about the rotation of electrons around a nucleus and marveled at the movement of planets around the sun.

Jealous came back and took my hand in her mouth again. A shooting star fell, and I raised my other hand to point at it. Why is it that all the stars don’t race across the sky? The Earth is spinning so fast, it seems like their movement should create one big blur above us. I’m sure my father explained that to me once.

I left for East London the next morning. There, I felt more useful on the maternity ward and in the clinics. A German doctor I worked with told me, “Here, you can save a few lives every day. All you have to do is pay attention.”

On my taxi ride to the airport to catch my flight home, the Zimbabwean driver asked me what I had been up to.

“I’ve only been here six weeks. It feels like such a drop in the bucket,” I said.

“In my country we have a saying,” he said. “‘Your hands only reach as far as your fingers will reach.’ You just have to keep trying. It’s God’s will.”

When I returned a year later for another project, I traveled first to the Grahamstown Art Festival to see the Hamburg Keiskamma Guernica. My feet echoed off high walls when I entered a room the size of an airplane hangar. In the center of the floor hundreds of clay pots in different shapes and sizes were encircled by a fence of twigs woven together, something you’d see in some African cemeteries. The program told me the pots were made of clay from the Keiskamma. Each contained a piece of paper with the name of a victim of the epidemic from the towns along the road down from the

highway. Two walls of the room were covered with white pockets embroidered by school children and AIDS orphans, each with the name of a loved one. Within each of these pockets, the program told me, a medical record of the deceased had been sewn—hidden, preserved, and treasured.

The giant tapestry took up the entire wall in front of me, with Picasso interpreted in red and green yarn. There was a cow with eyes wide in fear. There was a mother fleeing with a dead child in her arms or perhaps within her womb. There was Carol in a white coat to one side, a stethoscope around her neck, her arms raised to the heavens. But there also were the village grandmothers in a circle in the left-hand corner. There was faith, hope, and God.

Carol appeared out of nowhere and embraced me.

"You let them do it, Carol," I said. "You let them bring God and grace into your picture."

Carol just smiled to herself.

I asked Carol what had happened to the little girl, the wife, and the newlywed.

"I lost track of them," Carol told me. "But Nampalu wants to see you."

"She's still alive?" I imagined a shrunken old-young woman slumped in a wheelchair.

On my way to the treatment center the next morning, the village health workers sang hymns to welcome the day. Nampalu walked toward me, wearing my skirt over her curvy frame. Yes, she walked, holding her husband's hand, carrying her newborn in her arms.

"Thanks to you, Dr. Lisa. You and Dr. Carol," Nampalu said. "And to Him." She let go of her husband's hand and pointed to the sky.

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