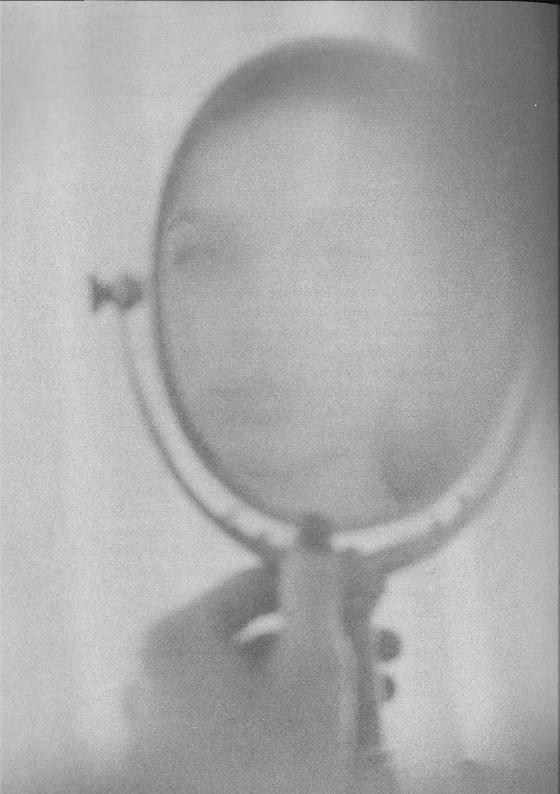


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"Surely everyone is aware of the divine pleasures which attend a wintry fireside; candles at four o'clock, warm hearthrugs, tea, a fair tea-maker, shutters closed, curtains flowing in ample draperies to the floor, whilst the wind and rain are raging audibly without."

-THOMAS DE QUINCEY



DEFACED

Rachel Jamison Webster

Bright scar, would I were stedfast as thou art

I. REMOVAL

I lost a good deal of my face this week—a large chunk on my right cheek.

The surgery followed a procedure called Mohs, in which the surgeon removes a tumor millimeter by millimeter, testing the skin sample after each cut to see where the errant cells end. The surgeon fluttered his fingers over my cheeks as he injected the anesthetic, and when he made the cuts I felt only uncomfortable tugging and an occasional pierce. What I remember most about the process was the smell of my flesh burning as he cauterized the widening

wound, one, two, three, four times, over the course of the day. Burning flesh has a cloying, thickly sweet odor, and it made me think of all the people in wartime, or in concentration camps, who would have had to breathe that smell. I wondered if those who survived ever really cleared the smell from their nostrils, their consciousness, their own living skin.

The surgeon's office happened to be next to the Holocaust Museum, which may have prompted these musings, and the book I had brought with me to read between cuttings was one I had been

wanting to read for a long time: Austerlitz by W. G. Sebald. The main character, Austerlitz, is unable to fully enter a life that feels arbitrary after the colossal losses of the Holocaust, as well as the personal loss of his family and early memories after he was saved by the Kindertransport. "What are you reading?" the surgeon had asked me at the beginning of the day. When I told him about the book and mentioned that I was a professor, he said, almost relieved, "I thought so! Because normal people don't read books like that!"

And I was feeling increasingly abnormal. The waiting room was filled with patients reading newspapers, iPads, and ad inserts—all of them elderly, except for me, all of us with unfortunate bandages on our faces, heads, and necks, though none so front and center as mine. Then a man in a wheelchair was wheeled in by two caregivers. He had luminous pale skin, a hairless head, and the air of restrained shock about him that is specific to the terminally ill, the kind of transparency that belongs to those who have been to the very edge and looked over. He also had the heightened presence of the ill, the urgent kindness that can arise when someone really sees the little island of time we live on, and senses that we are in a fleeting network of meaning every minute

I could hardly look at him. He seemed to be glowing with all I do not know yet, a radiance I had seen before when my partner at the time, Richard, was dying. I spent almost two years caring for him through the incremental paralysis of ALS,

before he suffered that disease's inevitable death of suffocation—a trauma that robbed me of life as I knew it, and that I as his beloved and caregiver underwent with him, as much as someone can. Those years trained me in the trajectory of death, not life, and strained my store of optimism. So as I returned to the surgeon's table again and again throughout the day, I did not feel relief that the diseased cells were being removed. I did not take it lightly, trusting in the overall health of my body. Instead, I thought, Cancer. I thought, There is a crack in the world that I opened when Richard first got sick, gaped when he died, and now I may fall right through it.

"I feel more and more as if time did not exist at all, only various spaces interlocking according to the rules of a higher form of stereometry, between which the living and dead can move back and forth as they like," muses Austerlitz, "and the longer I think about it the more it seems to me that we who are still alive are unreal in the eyes of the dead, that only occasionally, in certain lights and atmospheric conditions, do we appear in their field of vision."

There I was between procedures, reading an echo of my feelings. The sterile waiting room with its false paintings seemed unreal to me; our technologydriven culture, which will cut benign tumors out of people in their ninetics, which will perform skin surgery on someone who is dying, seemed unreal to me. It was almost as if the grave knowing my life had facilitated—an intimate awareness of mortality—had been steadily erasing me from a collective reality—of big-screen TVs, Facebook, magazines. "The dead are outside time, the dying and all the sick at home or in hospitals," Austerlitz reminds us, "and they are not the only ones, for a certain degree of personal misfortune is enough to cut us off from the past and the future."

To cover up all the removed tissue

from my face, the surgeon made a long, elliptical cut, and then pulled skin from my cheek over it, leaving me with a raw suture running from the inside corner of my right eye, down the side of my nose, into the line beside

my mouth—two layers of twenty stitches. I was awake while he sewed me up, and though he had been communicative with me throughout the day, he seemed to enter a zone in which his hands were free to sew while his mind swam the shallows of small talk. It was as if he'd forgotten I was there, forgotten I was conscious and alive. While I lay under a giant, sterile sticker knowing he was altering my face forever, he flirted with the nurse and updated her on the new big-screen TV he was installing at home.

Afterward, they left, and I remained on the table, breathing in the smell of burnt blood, my right eye swelling shut. I could hear the nurses at the station talking about the new Sony television that uses facial recognition software. "Yes!" one was insisting. "Something in it reads your face and selects channels based on that."

"I don't want my TV looking back at me!" another nurse said.

Even if it did look back at you, what could it see? I wondered.

2. BEAUTY

There I was between

procedures, reading an

echo of my feelings.

I once had the kind of unconscious, ethereal beauty that made men notice me and women dislike me and that played deeply

into my habitually apologetic behavior, as if I had to doubly earn my place and act generously to make up for attracting attention and judgments that I did not even want. At one point in my life, it was not uncommon

for me to be stopped on the street several times a day and called "hot" or asked out or told that I should be a model—all of which felt invasive, distracting, sometimes downright terrifying to a shy person. I read and wrote, but my life and work were continually being siderailed by external attention. I felt like a kind of prey, or one of those slow "right" whales that when multiple males swim in to mate, rolls over and plays dead, in a passive strategy of waiting, while never really choosing.

At the beginning of graduate school, I sat down with my advisor, excited because he had just read my poems and critical writing and was going to tell me where he thought our studies should begin. I blushed when he said, "You have great skill," and blushed even brighter when I realized he had said, "You have great skin."

In my thirties, I gave a reading from a poem I had written about a futuristic dream: "We can show you a map of every illness you are likely to get or to die from in your life," the doctor says in the poem, before shuttling me down a kind of luge track in which I see my own life flying before me while I lie patient and powerless. "Did you really write that?" a woman asked when I left the stage.

Sometimes I even wonder if I am remembering it wrong: Was the attention really that invasive?

"Yes," I answered.
"Oh," she laughed,
"my boyfriend and I
just couldn't believe it.
It is so profound, and
you don't look like you
could write something

so profound."

"I'm so glad you liked the poem!" I answered cheerily, because my mode was always to try to shift cattiness into sincerity, and to apologize for any discordance between my inner life and my outer appearance. I knew it was true. I just didn't have a face that announced intelligence. And this led to a particular form of insecurity in which I never really believed that encouragement was about the work and not about me in some superficial way.

But I had been losing that beauty for years—in the waves and eddies of natural aging. I no longer felt people turn to stare at me as I passed. Now I could enter a room and rather than react to all that attention, I could just look around and see what I thought. After all, those who are always responding to being seen are unable

to freely find the space to see. Sebald provides an interesting metaphor for this dilemma toward the beginning of Austerlitz. "Well into the ninetcenth century," he explains, "a few drops of liquid distilled from belladonna . . . used to be applied to the pupils of operatic divas before they went onstage, and those of young women about to be introduced to a suitor, with

the result that their eyes shone with a rapt and almost supernatural radiance, but they themselves could see almost nothing." I knew that role. But I was beginning to think that age, that being less desired as a woman and more

respected as a human, could win me the privacy to enter my own point of view. I was beginning to hope that my writing, which was always trying to trace the inner life, could drive time for once, rather than the external life that had been having its way with me.

Sometimes I even wonder if I am remembering it wrong: Was the attention really that invasive? But the other day, a beautiful young woman joined my yoga class, and I watched as she deflected outsized scrutiny. She wasn't arrogantly imagining that everyone was looking at her. Everyone was. After class, someone commented on her eye makeup, another on her bracelets, the teacher noted that she had taken off her long-sleeved shirt. The rest of us, of course, had also taken

off long-sleeved shirts and wiped smudges of mascara from our eyelids, but all of that went unnoticed, unexamined. She did not have that luxury. We were fellow women, most of us older, just making conversation, but every exchange circled back to her appearance.

And this reminded me that all humans are drawn to beauty and proportion. Studies show that people prefer mates with symmetrical faces, and that even very young babies are drawn to faces marked by balance, smoothness, and uniformity. We make assessments of others' faces in a matter of milliseconds and are repelled by abnormalities such as wounds, blotches, and asymmetry. There's a good reason why cartoon villains are always depicted as scarred; it signals inner damage and frightens us in our most basic human brain.

"What is the beauty of bodies?" asked Plotinus around 259 CE, in one of the oldest known essays on beauty. "It is something which at first view presents itself to sense, and which the soul familiarly apprehends and eagerly embraces, as if it were allied to itself. But when it meets with the deformed, it hastily starts from the view and retires abhorrent from its discordant nature."

The nurse who assisted my surgeon was herself beautiful, with that overly conciliatory manner that a kind person may develop to balance such bounty. Before they assumed her intelligence, most people would have noticed her blond hair, her perfectly placed hazel eyes and straight teeth, and the giant diamond ring that

is often the accessory to good looks. But between procedures, she had referred to herself as a math and science geek and we had talked about the books we were reading, "I am going to be with you when you see the scar," she told me after the doctor had stitched me up. "I am going to get you some Kleenex and hold your hand."

She held my hand tightly, and when she lifted the mirror to my face, what came out of my mouth was the scream that simmers in the mind whenever we are laid out on a table unable to move while experts do needling things to our bodies. "Oh my God!" I yelled, shocked, as involuntary tears ran into the blood of the wound. I had expected a few stitches, but here I was, a monster, a Halloween poster, with bloody sutures from the corner of my eye to my lower lip. The nurse stood holding the mirror in one hand and my hand in the other, and she had the compassion to cry with me, tears running down her own unmarked face. "I am so sorry," she said, and I knew that she meant it. She could understand how this scar would change my face, as well as the way I faced my life. And I thought, This is healing. Compassion. To be with someone in her pain.

3 RECOGNITION

"Was I the perceived?" poet John Ashbery asks in his seminal book Self-Portrait in a Convex Mirror, "or is it postponed again?" It is what we want, I think, perhaps on the deepest level: to be seen as we really are. But our culture instructs us to manage and augment others' perceptions of

us. Airbrushed profile photos on Facebook may hardly resemble the person they're meant to depict, and onslaughts of selfies and group snapshots can seem desperate to prove happiness and social fruitfulness. As a teacher of poetry, I have an opportunity to gauge development of the inner life, and I've observed that as we spend more and more time cultivating our images, we are in increasing danger of neglecting the inner I that longs to be perceived.

When I was a baby, my mom's artist friend came over to draw a portrait of me. I had spent the morning crying, so in the drawing she put a spot of white chalk on my cheek and said, "Rachel will go through life with a little tear, right here, on her cheek." The cancer that the surgeon removed came from this exact place, from the abnormal cells in a white burn scar that I got when I was twenty, cooking bacon for my college boyfriend even though I was a vegetarian. I had always thought of this scar as my tear, a smudge of pain, a nod to the sad girl I was inwardly while I outwardly put a happy face on things. I had everything, my exterior seemed to say, what did I have to feel sad about? But I had left a marriage in my twentics to weather a terrible divorce, ending up with a man twenty-three years my senior, having a child with him and then spending two years nursing him through the terminal illness ALS, which ended his life when our daughter was three. My life was more difficult than I ever made it look.

Still, I wanted people to pity me as little as I wanted them to desire me, and so I protected my essential introversion by assuming the manner of a cheery extrovert. I learned to keep going, to reach out to others with a smile and the hope that this act alone would relieve me of the burden of self for a moment, would buoy me outwardly even as my inner world was crumbling. And, to some extent, it did. I taught all through divorce, caretaking for Richard, and grief, and I believe that standing before classrooms of cager students, meeting them as someone whole, responsive, and often smiling, did help me to survive years of sleeplessness and sadness.

Still, my mom's friend had been right. I was going to go through life with a tear on my cheek, a splash of white that grew and grew and now had been gouged out and covered with a suture like a line of tears. Betty, the artist, died at forty, the age I am now. She had a lingering flu that turned out to be a brain tumor. She went into surgery to have it removed, telling her son to go to his basketball game and she would see him when she came out. But when the surgeon went in, the tumor was bigger than anyone had imagined. It ruptured under the knife and she never returned.

It was terrible for everyone, and devastating for her husband and three young sons. I was stunned by their strength on the day of her funeral, as maybe people were stunned years later by my daughter's and mine as I gave a eulogy for her dad with her standing there stolidly, holding my hand. And I remember that it was Betty's husband who said that Betty

would have hated aging. That now she would always be beautiful. I understand this comment now. It wasn't that he really found comfort in the idea, that he would ever be whole after losing her, or that he would have traded her youth and beauty for her life. But saying this granted him some space. Shocked grievers were rushing him, not knowing what to say, and this was

It was as if this pain

had entered the site

of our earlier pain,

and was echoing.

a way to put a momentarily acceptable face on an unacceptable loss-a way to grieve behind a mask.

"Your tumor had gone misdiagnosed for years," my surgeon said. "And it was bigger than anyone would have imagined."

And now it is gone, I remind myself, that is the important thing, while wondering in a near panic, "How will I learn to wear evidence of pain so publicly, on my face?"

4. THE HOUSE OF THE MOTHER

After I cried for myself and the nurse cried with me, she bandaged my wound, and then I cried again, thinking of facing my daughter. I don't want her to be afraid, I thought. It was as if this pain had entered the site of our earlier pain, and was echoing. And if that was true for me, how much more so would it be for her. for whom illness and loss had so tragically marked her first years?

According to some studies, babies can recognize their mother by the second day of life, not only by smell and sound but also

by sight. Their brains light up in entirely different ways when they see their mother's face, versus when they look at anything else. We seem to understand, from our first weeks of life, that faces are not objects, but windows to being. And our mother's face is, to some extent, our first external self. We learn the human vocabulary of emotion by mirroring her, by expressing our

> inner life and, hopefully, finding an echo in the outer world. The mother's ability to reflect and to respond to her baby's face makes up one of the child's first experiences of safety, comfort, and

correspondence.

I very consciously tried to steady my demeanor with my daughter during her father's long illness. She often saw me cry. I did not hide that from her because my weeping had a strange strength to it as it acknowledged what was really happening. But I tried to hide my fear from her, the cracking I felt inwardly. I remember showing it to her only once, a few months after her father was diagnosed and his steady decline had begun. In a matter of weeks, he had lost the ability to walk, to lift his arms, and to feed himself, and we were living with his outbursts of fear and denial. I had read her stories and was rubbing her forehead as she drifted toward sleep, and she turned to look deep into my eyes. And for a moment I allowed her to see me clearly. I looked at her as if we were allies in a terrible battle, and I let her

see my fear. She sighed the weariest sigh I have ever heard a two-year-old sigh and pushed me away, turning her back to me. She would see my pain, she would see me slip and falter invariably, and she would see her father's inevitable vulnerability, I realized. But in that moment I vowed that she would not see mine.

So for years, I had been her strong and smiling parent, and now

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mortality of my beloved,

but I have not yet faced

my own mortality.

I had to face her—as fallible, mortal, with my right eye swollen shut and a Phantom of the Opera-style bandage covering the right side of my face. And she was afraid at first. I saw the hesitance in her body,

but then I watched as she surmounted her fear and walked over to give me a hug. "It's scary isn't it?" I acknowledged, and she nodded. "But all the bad skin is out of there. And I am going to heal really, really quickly."

She played and laughed and, as usual, bargained to stay up later that night, but after she'd been in bed awhile, I heard her crying to herself. She called for me, and I was happy that she was not too afraid of me to ask me to pat her to sleep. When I lay down beside her, she pointed to a hairline crack in the plaster of her wall, one that has probably been there for ages, at least as long as we've lived in our 120-year-old house. "I just can't stand that crack," she said. Of course, I thought, feeling the crack in my face throb under its layers of stitches.

"It scares me," she went on, "I don't know why, but when I see that crack I think that my bed is going to keep falling down and then I won't be here anymore."

The relationships and certainties that tie us to life are patterned in us when we are very young. There was a crack in her mother, her central space of safety. "That is not going to happen," I said, rubbing her

back. "You are okay, I am okay," I hushed her, until she fell asleep.

Austerlitz, too, has an obsession with spaces as a way of controlling his sense of being so incidental, so ghostly in his own life. His life's work is a dissertation

on architecture, and his fascination with spaces reveals an emotional displacement, an inability to connect with others because he feels as aware of the dead as of the living. He is particularly haunted by an old section of Liverpool Street station in London. "I could not stop wondering whether it was a ruin or a building in the process of construction that I had entered," he notes. "Both ideas were right in a way at the time, since the new station was literally rising from the ruins of the old Liverpool Street."

It is here that he sees himself as a small child, in the actual space where he first met his adoptive parents and apprehended the loss of his old life. "When I saw the boy sitting on the bench I became aware," he says, "of the destructive effect on me of my desolation through all these past years,

and a terrible weariness overcame me at the idea that I had never really been alive, or was only now being born, almost on the eve of my death."

The house, the room, the train station become containers for our being. We project our feelings onto their markings—"the black and white diamond pattern of the stone slabs," "the crack in the wall"—and these shapes hold us—just like our mother's bodies do first and, later, our own.

5 HEALING

"There is a place in your mind that does not understand that you will heal," my friend says on the phone. "You are in a trauma mode, remembering what you've been through before, but you do not know what it is to heal yet, to come back from something."

But I will never come back from this, I want to say. I will wear this scar always, just like I live with what I know now, about life, about death. And yet, she is right. Because I had a vigilant doctor and a skilled surgeon, this cancer hopefully will not kill me. It will just alter, slightly, the way that I live. I may have faced the mortality of my beloved, but I have not yet faced my own mortality. And, I realize, I also have not yet faced my own life, my ability to return from the edge and still be here.

When I first saw the scar I thought, I can't let anyone see me, especially not John. Finally, after four years, I am in a relationship again. I texted him between the procedures, trying to keep it brief and on the bright side, but afterward, I told him not to come. I

said this halfheartedly though, because as much as I feared him seeing me, I also needed him to suture me back to reality somehow. Like my daughter, I felt in danger of falling down and down, away from the living again, back into that liminal crack between life and death—the space of terminal illness.

"You will still be beautiful to me," John said and got into the car to drive the six hours to my house. "And think of it this way. It will be scary at first, but it will be good for Adele to see you heal."

That night, after John arrived, we watched a movie, and all I could think about was the fact that no one on the screen had a scar. Beautiful people were playing inwardly scarred characters, but though life had hurt them, they did not have to show their wounds. Their skin, their faces, remained unmarked.

I could not take a shower, and I stank of dirty hair and dried blood. I had to rest propped up on pillows, and it hurt to talk and laugh, but John ignored those warnings and had me cracking up at the kind of gallows humor that arises in such moments. He slept beside me and my stale pillows. He woke when I did and murmured that he loved me, and, finally, two days in, I was able to fall into a deep sleep. I dreamed that I took the bandage off, and, somehow, the scar was not that bad at all. It had healed into a raised line, a fold that only someone who knew what to look for could see. I drifted in and out of sleep and the dream made me happy, as happy as the warmth of John nestled beside me. I

let him hold me and the dream hold me, a comfort—and maybe a vision of healing, of a time when pain will not be the first thing people see because they see *me*.

In Joy Harjo's poem "A Postcolonial Tale," she writes:

Every day is a reenactment of the creation story. We emerge from dense unspeakable material, through the shimmering power of dreaming stuff.

Once we abandoned ourselves for television, the box that separates the dreamer from the dreaming. It was as if we were stolen, put into a bag carried on the back of a white man who pretends to own the earth and the sky . . . We fought until there was a hole in the bag.

I need to fight until there is a hole in the bag. I need to see outside of our contained and colonizing notions of beauty. And, more importantly, I need to believe that I can dream again, wake again into the dream of my life. At some point, the collective dreams of youth, of beauty, even of health,

abandon each one of us. And then it is up to us to envision the next dream, one that is subtler, more complex, more individual.

"Your scar is the mark of having lived," my friend said. "It is the mark of having survived." The cancerous cells-symbol of my sadness and, possibly, result of my sadness, because of the years of sleeplessness and neglect that caregiving wrought on my body-are gone. What is left looks like a long claw mark of pink, regenerating skin, some suggestion of ferocity, of the strength it takes to keep facing life's challenges. It is nothing compared to the marks that so many have to carry. It is not the permanent facial paralysis endured by one of my colleagues. It is not the accruing paralysis that led to Richard's death. It is certainly not the loss of a whole family, a whole people, grieved by Austerlitz. It is a raw asymmetry and a surface wound that my surgeon hopes will merge into the natural shape of my face, the way life's losses-even the most terrible-merge into the overall shape of a life. They are visible to those who know us best, and they are what make us most human, fissures through which the inner, more deeply dreaming self may shine.