

# **STRONG AT THE BROKEN PLACES:**

## Tales of the Soul Aroused

by Dr. Charles Garfield

*"I am this groping intensity that is a soul."*

God knows how long I'd been staring at the Borges quote over my desk when the phone rang. It was Jim D., a uniquely tortured soul when I'd known him years ago as a patient at the Ft. Miley VA Hospital in San Francisco. Jim was now Director of Volunteer Ministry at First Calvary Presbyterian Church in the City. He wanted to get together to reminisce about a humbling and hair-raising time we shared one winter solstice over a quarter century earlier. Strangely, the soul words of Borges and Jim's torment of long ago felt connected; the kind of synchronicity that amazed me yet I'd grown to respect.

On the night of that solstice, shortly before Christmas, 1973, I sat at Jim's bedside watching him struggle to breathe with the help of a respirator. He had Guillain-Barre´ syndrome, a horrific neurological disorder which progressively paralyzes all the muscles of the body including, for some people, those controlling the heart and lungs. Jim was being buried alive, entombed in his own increasingly rigid body, silent yet aware.

An hour or so into our visit, I'd heard myself promise Jim that he wouldn't be alone, that "we'll go through this together." I'd made this bold guarantee knowing that if we couldn't keep his heart and lungs going, the Guillain-Barre` syndrome would kill him. I pledged to stay with Jim throughout his journey to hell, but as I grasped his limp, sticky hand and witnessed his body's betrayal, I felt progressively more freaked out in my supporting role in a real-life horror movie.

Something else was going on in that ugly green ICU room with the small windows loaded with high tech machinery swooshing and pumping to keep Jim alive. He seemed strangely okay or at least not terrified like I was sure I'd be in his situation. His calm eyes, his apparent equanimity, if indeed that's what it was, made me nearly as anxious as his illness. I wanted badly to communicate with Jim, so while there was some strength remaining in his hands, I devised the simplest of languages, one squeeze for yes, two for no, in response to my questions.

"It's stunning," I thought, "what we can say to one another using a binary language." Of course, I knew a bit about binary languages from my days as a computer scientist on the Apollo Eleven first moon-landing project.

"Are you in pain, Jim?" Two squeezes. "Do you need anything from the nurses?" Two more. I slowed our pace so as not to exhaust his energy. "Should I stay and talk with you?" Jim's response was unequivocal, one tight squeeze while staring straight at me, eyes locked on mine. I was surprised by his show of strength and relieved that he wanted me to stay with him.

For three months, I'd watched Jim disintegrate through progressive losses, first feet, then hands, legs, speech, and now near total paralysis. He lay silent and still, at the mercy of his disease and the white clad

health professionals who cared for him. Jim had already lost over thirty pounds and had begun to resemble the photos of camp inmates I saw at Auschwitz years later.

After two hours at his bedside, I left Jim's room and headed for the gym. Disquieting questions flooded my mind. "Why had I volunteered to accept this assignment, "to go through this together", when I could have easily said no to my supervisor's request? The ever-present lump in my stomach was an indisputable sign that Jim's struggle, his paralysis and possible death, intensely rattled my precious peace of mind. As I pumped iron like a madman that evening, trying to prove to myself that I was safe, untouched by deadly disease, I couldn't shake the disturbing thought that my muscles couldn't save me from the horrors of the world. My beloved bodybuilding, my protective ace in the hole, was a fantasy in the face of Guillain-Barre´ syndrome and a host of miserable maladies.

For weeks, I'd made a beeline from Jim's bedside to the gym. I'd lift weights until I was rescued by a delicious "high", that state of heightened aliveness that experienced bodybuilders, like advanced runners, know well. For the time being, I'd felt safe, not vulnerable like Jim. Since I was sixteen, my muscles were a guarantee, a weapon against death and debilitation. Now I'd seen the enemy face to face and my psychologist's mind raced with annoying logic about my body's vulnerabilities and clinical interpretations of my dedicated service to Jim, i.e. "clearly a counter-phobic response, an attempt at mastery aimed at reducing anxiety around issues that frighten you most."

After each workout, I'd cook in the sauna, shower, dress, and drive home to the East Bay, my shakiness held temporarily in check. Despite my crazy schedule, I'd call the nurses two or three times a day for an update on how Jim was doing. My attentiveness would, hopefully, be contagious and they'd watch him more closely. I needed Jim to make it, to live, to defeat this malignant mistake that had invaded his body.

Jim counted on our visits, and communicated so via one hearty squeeze after Guillain-Barre´ stole his speech. But why? We were intimate strangers linked by crisis in an alien world. Jim was a musician, a clarinetist, a vocation about which I knew virtually nothing. Occasionally, I'd wonder who "we" really were. "Why do people connect more deeply in catastrophic times? All it takes is a fire in the hills or a strong earthquake tremor and I'd run into neighbors on their best behavior who I'd never known existed."

"Did I need Jim as much as he needed me?" "Was our relationship rooted in a "countertransference reaction", an unconscious undigested fragment of my own psyche implying a lurking neurosis, i.e., "he's getting his emotional needs met through his relationship with his patient"? There was something healthy and undeniably positive in play, something more than a psychological deficit revealing itself. At times, I'd felt an inner peace at Jim's bedside that I'd rarely known in my life. A warm suffusion of "all-rightness" that I'd experienced in nature, watching the night sky, staring at newborns in our maternity ward, and during loving encounters with people, even strangers, that were soul-sized.

An opening of hearts was taking place because death was knocking at the door. A healing of mind and spirit was occurring despite Jim's declining body, and my mostly armored one. I'd ask myself: "Who is the Jim I'm visiting here? His personality is on hold, his body's nearly dead, our normal channels of communication are shut down, yet we're connecting more deeply than I do with almost everyone else in my life."

At home, I would torment myself with more questions. "Why the hell do I sometimes feel peaceful in the midst of Jim's horrible misfortune?" And more perplexing, "why did Jim admit to the same thing before his power of speech deserted him?" Even now, lying nearly lifeless in a sterile hospital room, trapped in an immobile body, he seemed, at moments, happy. "Was he really happy or was it my projection?" "Were we sharing something important or was he simply grateful he wasn't alone?" "Why did we find ourselves

nested in a kind of grace where fear moved, however briefly, to the periphery?

My graduate school professors and psychology texts never spoke about a profound inner peace that can envelop us when we look into the eyes of a person in pain, a man with every reason to despair. I never knew that rooms like Jim's could become enlivened places where a soul's voice could be heard. The ancient Greeks called such a sacred sanctuary a *temenos*; where we might feel soul-deep connections to one another and to the eternal. A temple to the gods or God, a grove of oak trees, a sea grotto, or a barren hilltop the Greeks understood as sacred. My professors would have summarily dismissed the notion that an ICU room in a standard issue VA hospital, a veritable temple to rationality, a supremely practical place where blood and guts were routinely spilled in the hope of cure, could have anything to do with the divine.

Occasionally, when I sat with Jim I'd feel my heart pounding in my chest like a tom-tom, beating in eerie resonance with the beeping heart monitor. My breathing would mirror his breathing as if we were one conspiring organism.

At other times, my heart seemed to beat faster and I'd wonder if it were speeding up to compensate for Jim's slowing heart. "My heart's beating for two, trying to ensure life in the system. We're linked, alive together." At those times, I'd feel certain he'd survive. Soon, however, a dark curtain of fear would descend, a sorrow-riddled separation that put "me over here and Jim over there, light years apart." He'd been kidnapped again by his illness and taken to a place where I couldn't reach him. All I was and did would not be enough to ensure his survival, even with the help of medicine's best.

"God, don't let this man die," I prayed passionately when I felt most desperate, followed soon by Jim Morrison's screaming admonition: 'You can't petition the Lord with prayer.' I guess Crazy Jim, the ICU docs, and my Apollo colleagues would all agree on one thing, that intercessory prayer only has a positive effect on the one praying. "I guess they're right. Help won't come from some Supreme Being who answers our prayers, a Papa of Everyone who turned a deaf ear to the terror stricken pleas at Auschwitz."

Every so often that winter night I'd leave Jim lying tired and frail, entwined in a tangle of wires, drains, and tubes, lost in a laboratory of the most advanced machinery medical science could muster, and "ambulate" – medicine's substitute for the perfectly good word "walk" – to the cafeteria. His room was quiet except for the beeping monitor, the hum of the nasogastric suction apparatus, and the respirator's rhythmic "woosh". Jim's breathing was now erratic. His physicians had told me we'd soon know if his muscles would jump-start back to life or if his heart and lungs would shut down.

Hungry and bleary-eyed, I'd make my way down the gray-green hospital corridors, one hypnotic sameness after another, designed, it seemed, to dull the mental state of a pilgrim searching for sustenance down to that of a zombie. "Was the 'he' trapped in Jim's body, his personality, his soul, both or neither?" During the best of our binary conversations, when those blessed accidents of inner peace I'd later call "Shanti moments", would surface, I'd know that Jim was more alive than many allegedly healthy people in my life.

One time, as I passed through the hospital lobby, I heard a cohort of carolers belting out their best holiday cheer. Dressed in Dickensian costume, the singers surrounded a tall evergreen Christmas tree decorated brilliantly with every manner of bauble, bangle, and bright shiny Walmart bead. Above the immense tree, taped high on the wall, was a gold colored message: PEACE ON EARTH, GOOD WILL TO ALL. Peace and good will, precisely what I'd hoped to bring to Jim. But how? "These feelings of impotence suck," I thought. "I want my delusions of competence back, my inflated sense of mastery, or any defense against this damn dying of the light."

“O Holy Night. The stars are shining brightly....” “Silent night, holy night....” I waited until the carolers had completed their repertoire and were glancing around at their meager audience for appreciation. Clapping loudly and self-consciously, I approached the group, introduced myself as “Dr. Garfield of the Psychiatric Liaison Unit”, and asked if they might pay a visit to the ICU where “some of our most seriously ill patients would definitely appreciate your holiday cheer.” The carolers promised to sing for us within the hour. Satisfied I’d done Jim a good turn, I resumed my quest for a turkey sandwich on rye and a hot tea. Thirty minutes later, my mission accomplished, I retraced my steps to the ICU after inhaling a dinner which had grown to two sandwiches, a tea, and two bananas, a reward to my bulky body for all the Christmas goodies it was missing at holiday parties I’d blown off to stay with Jim.

I passed through the now silent lobby which tingled with an invisible excitement. The immense tree glowed more brightly than before. It seemed more alive, enhanced by the moving holiday melodies. As my eyes were drawn up the tree to the golden message of PEACE AND GOOD WILL, I spotted a round blue-green globe sitting atop the tree where the cross of the long-suffering Jesus normally would have been. “This hospital doesn’t need more reminders of suffering. At least that miniature Earth looks healthy”, although I wondered if we’d wise up in time to stop assaulting our home planet.

I sat near the tree and thought of Jim, lying trapped like those caged laboratory animals used for experiments in this very medical complex. Absentmindedly, I picked up a wrinkled newspaper left open to the horoscope. “How many nervous souls have relied on this very page for reassurance while they awaited the results of an operation, a treatment, an appointment?”

“What the hell. Jim and I can use all the help we can get.” I didn’t know his birthday so I looked up my own, July 10th, and learned that “the moon rules people born under the sun sign of Cancer, a water sign”. “I can’t escape that little celestial bugger,” I whispered to myself, and beamed for the first time that night.

The VA hospital sits on the far west side of the city with a gorgeous daytime view of the Pacific, one of God’s great creations, and within sight of the Golden Gate Bridge, one of the human-made wonders of the world. Staring at the bridge through the window in Jim’s room, I flashed on the simulation experiments we did with the astronauts on Apollo Eleven only five years earlier. One of the great scientific accomplishments in human history, the first lunar landing was a project of nearly unimaginable complexity. I remembered those fighter pilots with “the right stuff” who were hooked up to all manner of recording devices. “Trapped in the hardware like Jim,” I thought.

In the late sixties, I played a bit part as a computer scientist working on the Lunar Excursion Module (LEM) at Grumman Aerospace Corporation, a NASA subcontractor in Bethpage, New York, on Long Island. On July 20th, 1969, ten days after my twenty-fifth birthday, Neil Armstrong then Buzz Aldrin stepped off the porch of the LEM into the fine dust of the moon. “One small step for man,” Armstrong said. “One giant leap for mankind.”

Throughout the NASA network, thousands of men and women did the best work of their lives to accomplish this astounding achievement. I recall thinking at the time that our success came not only from meeting the technical challenges we faced. There was something else in the mix beyond the scientific demands of the mission. The people on the Apollo team supplied an essential ingredient. In the years after the moon landing, I began to see the outline of something more than a singular scientific achievement, something about the farther reaches of human capacity.

Not sure what I’d find, I set out in search of a clearer view of the upper limits of human potential, a journey that landed me at Jim’s bedside that winter solstice. I’d left behind my career in mathematics and space science, and completed a Ph.D. in clinical psychology at University of California at Berkeley. It was during

my doctoral internship that I'd met Jim. If Apollo Eleven was an example of the most positive of compelling human challenges, I wondered about our capacity to negotiate the most negative of circumstances, for example, people afflicted with life threatening illnesses.

"Could those who survived Guillain-Barre´ or cancer also be viewed as high achievers like my coworkers on the Apollo project?" If so, how did they do it? How did they survive?"

Of course, Jim's high stakes situation was excruciatingly difficult, far more daunting moment to moment than any job. However, when I first mentioned the Apollo mission to him, he spoke of his "mission to survive." He had a clarity that came with a fight for his life. Samuel Johnson was brusque about it two hundred years ago: "When a man knows he is to be hanged in a fortnight, it concentrates his mind wonderfully."

On my solstice night trek back to the ICU, it dawned on me that my Apollo pals and Jim were birds of a feather. Although the external challenges they faced were vastly different, one inspiring and positive and the other strongly negative, both "missions" were challenging to the core. Negotiating each challenge required heights of motivation and the mobilization of inner resources most people never thought possible.

"How do I survive?" replied a cancer patient, a nationally known concert pianist. "I draw on resources I never knew I had. Staying alive is the toughest thing I've ever faced, physically, emotionally, spiritually, much more difficult than playing Mozart or Chopin."

Another time, when asked what he had learned from his heart attack, a man in his fifties handed his questioner a piece of paper on which he had scribbled some words from Ernest Hemingway's A FAREWELL TO ARMS: "The world breaks everyone and afterward many are strong at the broken places."

I recalled a time early on when Jim jolted me by saying he knew when I was coming to visit before I arrived. "How, pray tell, could you possibly know?" I asked, perhaps anticipating a paranormal explanation. "It's the sound of your workout shoes, that weird squeaky sound they make all the way down the hall. It's one of the few things that makes me happy", he'd told me before Guillain-Barre´ silenced him.

Suddenly, I felt indispensable, a tad heroic. I was the difference between zero and one, between having someone who cared about him and having no one. I was a central figure in Jim's mano a mano duel with death. More accurately, all the ego inflationary tendencies I'd long struggled with, those compensations for insecurities born before age ten that pushed me to excel, standout, be first and foremost, roared to psychic center stage. I soon felt deflated, sad, humiliated.

"Damn, do we ever live long enough to get over our childhoods?" It was a question one would think a psychologist could answer. My old emotional script seemed an ugly intrusion in a situation far more important than those neurotic struggles for validation and approval. I wasn't the star of this show any more than Jim's lead physician was or anyone else in his life. Among Jim's caregivers, there wasn't a star, just a few human beings supporting a soul in crisis.

What Jim found most helpful, what we both discovered was most nourishing, were those soul satisfying moments of communion, those times when we met as equals beyond the pain. I slowly opened my heart to him and to what was occurring in his life. Over time, Jim's welfare became more important to me than my needs for security and approval. We were partners in a soul-sized struggle with Guillain-Barre´ syndrome. Caring for Jim was motivated less by my ego's drive for mastery than by wisdom's grace.

If there was a star in this show it was Jim. He continually summoned the courage to get through the hour and the day, to survive in a situation suffused by the possibility of death. Jim was heroic not because he

was fighting for a glorious cause or ideal, but because he found within himself a talent for staying alive in the face of the physically and psychically eroding invasion of his disease.

As I approached the swinging doors of the ICU, I recalled my favorite quote from graduate school, one of the few I'd committed to memory from the immense poundage of compulsory readings we were assigned. I promised myself I'd have these words calligraphed and framed for Jim if he returned from the darkness that had gripped him. William James, arguably America's greatest psychologist, wrote a century ago:

"Most people live, whether physically, intellectually, or morally, in a very restricted circle of their potential being. They make use of a very small portion of their possible consciousness, of their soul's resources in general, much like a man who, out of his whole bodily organism, should get into a habit of using and moving only his little finger. Great emergencies and crises show us how much greater our vital resources are than we had supposed."

If I understood James, he was saying that "great emergencies and crises", and, I might add, their opposites, "benestrophes" or great positive circumstances like Apollo Eleven, call us to use more of the "soul's resources", more of our psychospiritual capacities, than is ever the case in daily life. Life in extremity can heighten our "possible consciousness" and enable us to "draw on resources we never knew we had". Right now, Jim couldn't even move his little finger, yet I wondered what connection might exist between his body's rebirth and the talents of his psyche and soul.

Waves of "Ave Maria" soon rolled over us from the hallway outside the ICU, growing louder each time the doors swung open, then dulled when they closed. The carolers, perhaps anxious when they glimpsed the life and death dramas inside, sang with greater passion than they had at their sparsely attended lobby concert. Jim's eyes opened in response to the open door crescendos. He seemed startled, his eyes darting right then left, his head frozen in place. Was he wondering whether he'd awakened to this world or the next?

"A concert for you, pal," I joked. "I used my connections in high places to get these singers to belt out their holiday tunes." Jim looked at me expressionless, then glanced toward his left hand, asking me, I imagined, to grasp it. He knew far better than I that people in extreme situations don't survive without help, that survival is a collaborative process. Sitting in the one decent chair I could borrow from the small ICU waiting room, I took Jim's shrunken left hand in my left one, which rested on his bed inside the guardrails.

"It must be sheer torture not being able to applaud my lame attempts to lighten the mood," cringing at my choice of words. A single strong squeeze, a long pause, and then I laughed, realizing my friend's sense of humor was still intact.

Jim began drifting in and out of waking consciousness. I stayed at his side until well past midnight on that longest night of the year. Winter solstice is a special time; a turning point where the darkness that is everywhere heralds new days with increasing light. I prayed that life's burdens would soon get lighter for Jim. Looking again out the window behind his bed at the cold, quiet, new moon night, I remembered the technological space junk that my astronaut colleagues had left behind when they departed the lunar surface. Glancing around the room at the life sustaining apparatus surrounding Jim, machines we were grateful to have at his side, I nonetheless wondered how I'd feel about this hardware when Jim departed the scene. They'd be medical marvels if he survived, and high priced junk if he didn't.

I remembered the first photos of the lunar Earthrise, those dazzling shots of our planetary home taken from the moon. "The most important pictures ever taken," I thought. "Apollo Eleven's real gift to humanity." Seeing that blue-green jewel nestled in the blackness of space showed that we were, without question,

citizens of eternity. “They also showed that Nietzsche was wrong. God wasn’t dead. He was demoted, free to pursue other opportunities.” The old God in the clouds, captured so magnificently by Michelangelo on the ceiling of the Sistine Chapel, needed a replacement.

When Apollo Eleven ripped past Our Father’s clouds, through the sky, and landed on our nearest celestial neighbor, God, the Papa of Us All, could no longer look down and Lord it over us. In one fell swoop, the Apollo mission relieved Him of his post “down there.” “A new God is on the scene,” I’d thought, “a God behind the old God. This God is not a Papa who protects or intimidates but a Wise One, a male/female presence who might help Jim and me link the inner world of soul to the outer world of survival.

Jim stirred and I was yanked back to the realities of the body. Celestial musings, those soul prints, the remembered residue of deep feeling and high image that I’d experienced during the Apollo days, swiftly faded. Jim’s hand was now hot and sweaty. “Did he have a fever, pneumonia, the old man’s friend but Jim’s enemy?” I called a nurse who efficiently checked his vital signs and assured me he was “just fine”, an assessment that didn’t quite capture the gravity of the situation.

When she left, I asked again: “Jim, are you in pain? The nurses can help if you are.” My question was followed by two hard squeezes. Jim’s physician seemed certain we’d be able to control his pain, but I worried whether the dulling effects of the required meds might further loosen Jim’s tenuous grip on this world. “Want to know what I was just thinking?” One strong squeeze. “I was thinking of my old friend, the moon. There’s a new moon outside, but I was imagining a full one when I looked through your window back there.” Jim had heard me talk about the lunar landing project when we’d first met and he’d shown interest. “I have a hunch that a mix of space age technology and inspired effort that got Armstrong and Aldrin to the moon and back, will get you safely out of this place. You’re like one of our astronauts with “the right stuff”.

“You know, Jim, when I was a kid in Brooklyn, maybe six or seven, I’d sit outside on the stoop before dinner, and smile at the moon. I always felt it was smiling back, looking after me. It seemed alive and intelligent. I suppose it sounds weird, but I’ve always felt safer when the moon was full. A full moon seems more aware, with more light to pay attention to me.” I grinned at the narcissistic memory and the groans of a grad school chum, an aspiring researcher, when I compared the full moon of my childhood to a skilled psychologist attending to the plight of a patient’s dark night.

“I’d sometimes hear the moon talk to me like a protective parent. I could feel its words in my heart. ‘I’m here, Charlie,’ it would say. ‘I’ll always be here, and I’ll always look after you.’ I closed my eyes, took a deep breath, and inhaled a favorite childhood memory. I loved reliving those delicious moon memories which often took place outside my home on Sheffield Avenue in Brooklyn. Now, decades later, I was looking down at Jim, a good man hanging on to life in a crummy ICU bed. I heard myself say with a wide grin: “The moon’s here tonight, Jim, a new moon that’ll get brighter each night past Christmas and New Year’s. It’s up there, looking after both of us.” My heart nearly jumped into my throat when I saw a twitch of a smile on Jim’s face. My fingers closed around Jim’s limp left hand. “Did you just smile, Jim? I think your lips curled and your mouth moved a little.” A long pause followed as if Jim was searching for the truth, thinking his way back to a feeling. Finally, there was a single squeeze. By the time I could see past my tears, dampness had filled Jim’s eyes and there was another hint of a smile.

Jim’s journey didn’t have an easy Hollywood ending. In fact, his recovery was a tough yet tender time. I’m now convinced, however, that it began that solstice night. Yet, as I drove across the Bay Bridge heading for home, I began to doubt whether I’d seen Jim smile at all. By the time I fell into bed, only hours before the new moon’s official arrival on December 24 at 7:08 am PST, I was plagued by uncertainty. If Jim’s smile was real, perhaps it signaled the last of his waning muscular movements rather than a joyous return

to functioning. There was no way to tell if Jim's faint facial movements, if I'd actually seen them, would precede a further descent into darkness or whether they signaled life renewing itself.

For days, I exchanged stories with Jim's nurses about a moving pinky or a wayward wink until we began to wear ourselves out with wish fulfillment. I began to feel like Sherlock Holmes searching for clues that no one else could find, evidence hidden in plain view that we'd overlooked and that heralded Jim's survival. On Christmas Day, I bought a large framed print of a full moon and hung it on the wall facing Jim. Then I stood at his bedside waiting for even the subtlest sign of excitement or any indication that Jim was returning.

"I'll tell you what, pal. The new moon will soon come all the way back," I said, pointing to the picture on the wall. "There's no doubt in my mind that you can, too." I suppose I wanted Jim to repay me with a grin or a twitch or a snuffle for my pushy and presumptuous pep talk. I was rapidly learning that in the caregiving biz you don't always get what you want. People to whom you give your all might die, or struggle in chronic states of intractable pain. They may suffer needlessly like Jim or those crying cherubs with cancer whom I tried to cheer up during my visits to pediatric oncology or the gay men with AIDS I'd care for years later. Like Jim, they are my teachers, everyday heroes trying to persevere hour after hour, fighting to survive in that endless empty time without a favorable prognosis or encouraging signs of progress. I marveled at their capacity to keep going, how they continued the good fight, always haunted by the knowledge that death might win.

On Christmas night I rested on my redwood deck and looked up, like W.H. Auden did, at "Vega conspicuously overhead." One of the sky's most famous stars, Vega is the luminary of the constellation Lyra, the Lyre, symbolizing the harp of Orpheus, the great mythical musician. I glanced toward San Francisco and pondered the fate of another musician. The night sky was comforting, each star looking like an eye. "Which eye is Pop's?" I said aloud, thinking of my maternal grandfather, Harry Friedman, who'd died earlier that year. I remembered watching the Apollo Eleven landing with him on July 20th, 1969 at my parents' home in Bellmore, New York on Long Island.

Pop was a man born in the 1880's in Linkeveh, a tiny Lithuanian shtetl near the city of Kovno, now Kaunas. After enduring a long boat ride from Europe in 1910, a trip far more fortuitous for pre-World War Two Jewish immigrants than anyone could have imagined at the time, he arrived in Brooklyn. He would soon send for his betrothed, Gertie Schneider, a distant cousin who lived in Pasvety, another tiny shtetl nearby. Together they'd discover that the streets of the New World weren't exactly paved with gold, but Brooklyn was certainly better than Lithuania. Over a half-century later, my Pop, born before the invention of the airplane or automobile, would find himself sitting in front of a television with his first born grandson watching two men walk on the lunar surface.

Pop seemed annoyed by my preposterous claim that humans had reached the moon, that "such a smart boy could believe anything from that television." He'd often felt betrayed by the failed promises of TV commercials that "lied to me" and viewed nearly everything he saw on the "boob tube" as fiction. When I reminded Pop that this was the project I'd been telling him about, he grew silent. He stared out the window at the nearly first quarter moon, still not trusting the reality of the television images we were seeing.

"They're on that moon," he said, pointing out the window at the night sky. "Yes, Pop," I replied. "They're on that moon." A few moments of silence passed before Pop whispered a single word. "Miracle," he said, still staring out the window. "Miracle. We watched arguably the greatest scientific accomplishment in the history of the world in silence. For my Pop, however, the moon landing was an event of biblical proportions, as astounding as God's parting of the Red Sea. "He's right", I thought later that night. "It is miraculous."

I realized he'd inadvertently taught me a great lesson. We'd entered an era in which, increasingly, one person's miracle would be another person's job.

I prayed that Jim was up to a miracle. I knew for certain, whatever happened, I'd remain with him. I'd share some of the suffering and always the inspired moments of connection soul to soul and to something larger than us. "Maybe a miracle's happened already," I wondered, smiling broadly at the thought. What I learned about the spirit of service at Jim's bedside helped prepare me for people I'd meet on the cancer ward at University of California Medical Center in San Francisco, and the Shanti clients and their caregivers who'd face head-on the shattering eruption of the AIDS epidemic.

Often, I'd ask myself: "Why are Shanti volunteers willing to upset their precious peace of mind and dedicate themselves to such challenging work? I can't describe their motivations any better than one of them did himself in a piece titled "Beyond Ourselves" given to me in 1999 at our twenty-fifth anniversary celebration.

"Such deep longing for doing good,  
This great shared desire of hope and justice,  
Reaching outside ourselves into the lives of others,  
Transcends the individual, bonds the community,  
Shines beyond the gift and the giver,  
Enriches our world, their world, all worlds."

In 2001, many years after our shared solstice at the VA hospital, I was thrilled to get Jim's call. It was deeply gratifying to learn that his service career was inspired by the times we spent together. We arranged to have dinner at Calzone's, a popular North Beach ristorante in San Francisco. I arrived a few minutes early at the classically architected First Calvary Presbyterian Church to pick him up and parked across the street. "What would Jim look like at age sixty-one? I barely remember what I looked like twenty-seven years ago. Would there be evidence of the Guillain-Barre syndrome?"

Ten minutes before six, the church door opened and a white haired man dressed in a tweed sport jacket and walking with a cane approached me. I waved as he headed toward my car. Jim smiled warmly as if we'd met here this way for dinner for years. "Charlie Garfield," he bellowed, proving there was ample energy in his system. "I'd recognize you anywhere."

"It's great to see you, Jim," I replied. He looked remarkably well for a man who'd recently had a heart attack and a hell of a lot better than the moon-faced, swollen man on steroids I'd known at the VA.

A long handshake and our eyes locked as they had all those years ago. "I'm starved," he said as I pulled out on to Fillmore Street. Turning on to Pacific, one of those downward sloping San Francisco adventures that regularly intimidates tourists, my heart high jumped in my chest. Straight ahead, staring at us from a blueberry sky, was a huge translucent disk, a full moon the color of a paper-thin Japanese flower. I could

easily spot features of the lunar landscape and maybe even the Sea of Tranquility, close to where Apollo Eleven had landed. “The moon, look at that moon,” I whispered, thrilled that our old friend had joined us for dinner.

Calzone’s is a typical Italian eatery, part restaurant, part sidewalk café, and, inside, a hint of deli hanging overhead. I adored the red, white, and green colors, and the pathos of Italian opera and folk songs wafting around and through us. The transporting smells carried me quickly to a timeless place, an emotional mix of San Francisco, Brooklyn, and anywhere in Italy. The lasagna was good but it felt a distant second to the conversation, a three-hour blur of alternating monologues of memory.

“What prompted you to call after so long?” I asked. Jim said that his heart attack had propelled him to reach out and “finish some unfinished business.” “I wanted to contact a few people who’d made a difference in my life.” He especially wanted me to know that he’d kept his promise to “make something of myself if I survived.” My concern that Jim and I would have little in common except dusty recollections of our time at the VA were quickly dispelled. Our emotional rollercoaster conversation shifted rapidly from personal relationships to caring for those in need to the crazy state of the world. I was delighted he’d been inspired by Shanti to build a peer support volunteer contingent at his church, then shuddered at the thought that Shanti might never have happened had we not met. Finally, it became clear that if caring for souls in crisis like Jim was the heart of Shanti’s animating mission, our volunteers were that heart’s left ventricle.

“When you founded Shanti, did you ever think what its volunteers would mean to San Francisco and so many other places?” Jim asked. Then, answering his own question, “I guess not since there wasn’t any AIDS in 1974.” Jim, in the words of my maternal grandfather, was “a real mensch”, a man whose barely won struggle to survive had resulted in a life of service to others.

“I’ve been following Shanti’s work for years,” he said as we split a tiramisu and finished a fine bottle of Chianti. “Why didn’t you ever call me?” I asked. Jim paused, a rarity that evening, and looked as if he didn’t have a good answer to my question. “I wasn’t sure you’d remember me, especially with all the work of those awful AIDS years.” I shook my head and smiled. “Forgetting was never an option.”

After dinner, we talked nonstop through the cool, dark North Beach streets, up Columbus to Stockton, toward my car. “Remember Dumbo’s feather?” Jim thought for a long minute before answering, perhaps not wanting to disappoint me about something important. “No, actually I don’t.”

“When you were on the respirator that awful night at the VA, we were all praying you’d soon breathe on your own. I told you about Dumbo and his feather. It’s the one he needed so much in order to find out he could fly without it.” Jim turned and hugged me without saying a word. As I began our drive to drop him off at his apartment, he said: “I guess I found my feather because I definitely learned to fly.”

Later that night, I lay outside at home contemplating the heavens, the eyes in the sky. My mind drifted back to that winter solstice at the VA, a time of turmoil for both of us, and a uniquely dark night for Jim’s soul. I was also at the cusp of a transition that night. Old beliefs about my relationships, my work, and my self would soon be challenged and, in time, would die. New beliefs, healthier ones, would replace them. I’d discover that service not success is the ultimate organizing principle of a life well lived, the sine qua non of the spiritual life, the moral life, the contented life.

When that winter solstice ended, a psychospiritual sea change marked by Shanti’s birth was just beginning for me. In time, I would see that Shanti, my muse, my soul’s song, had spoken to me since childhood, long before I knew her name. Now, as I leave midlife for Medicare, I feel a call to pour myself into telling her truths as I try to live them.