





56

Five  
Dials

# ABOUT FIVE DIALS 56

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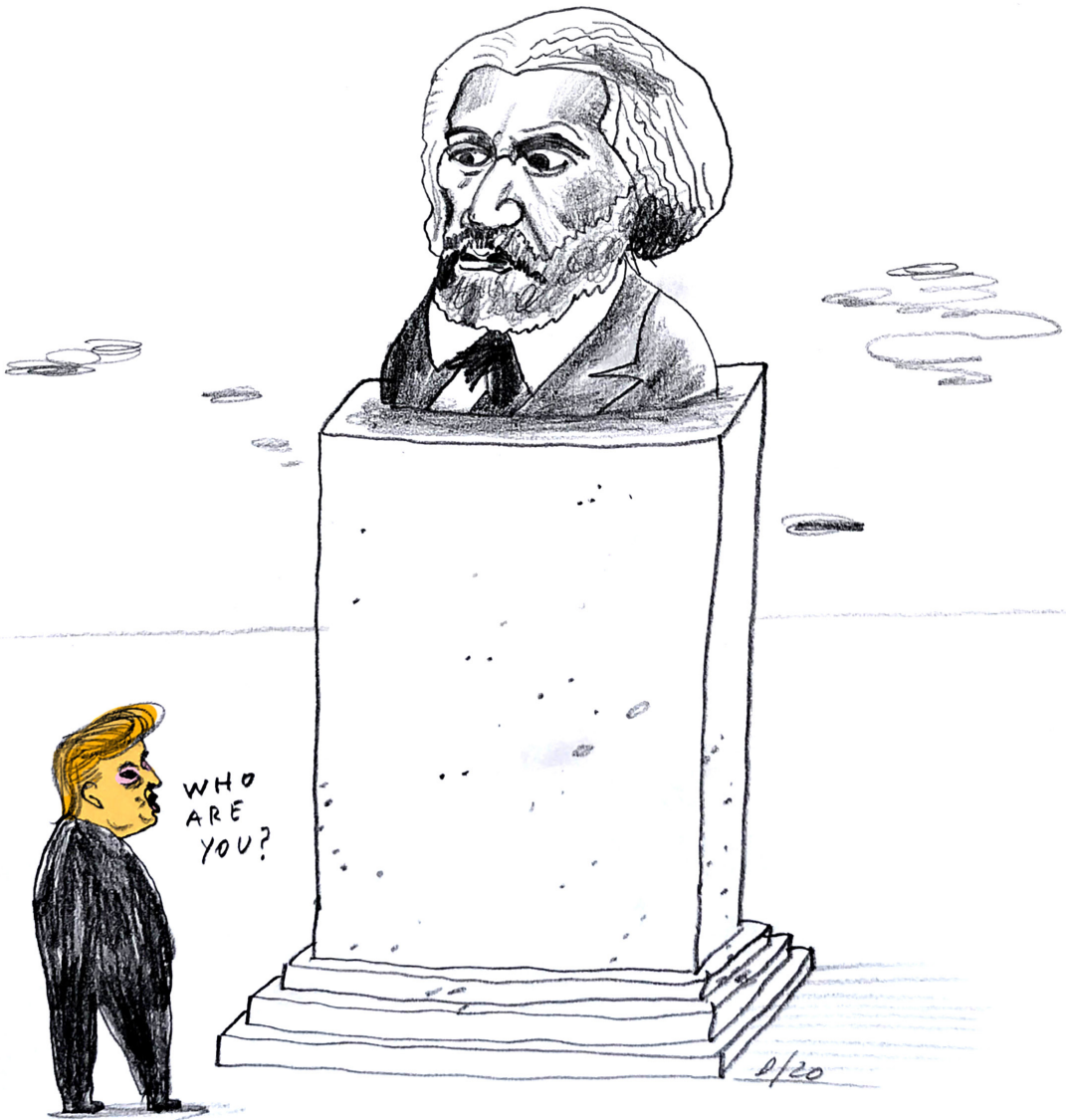
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2/20

# QUESTIONS WE'VE BEEN ASKING

What is it like in this time  
of COVID-19 for members  
of the trans community  
paused mid-transition?



How can we strengthen  
the ways our bodies heal  
and prevent illness?

Why is forgiveness good  
for our health?

How are novelists tackling the  
subject of whiteness?

What's going with the  
statues atop our plinths?

*To start us off, here are a few questions answered by our friend, the award-winning Turkish novelist, Elif Shafak*

5D

What are some of the long-range consequences of COVID-19 that only a fiction writer could imagine?

ES

If the pandemic lasts much longer than expected or makes an unforeseen comeback or appears under a different name or in some other form while the memory of this crisis is still fresh in people's minds, there will be widespread changes beyond imagination. Our social, economic, political and personal lives will be radically altered. So much of what tomorrow will be like depends on whether we can heal inequalities today. It is a critical stage. Inequalities do matter. If they continue to deepen and worsen, those who have antibodies (or some kind of immunity from the next virus) or those who have the means to isolate themselves from the rest of the society will become the new pandemic-aristocracy. In the long-range further social fractures will emerge, added on top of existing ones. Health will become not only a 'status' but also an elite privilege. But such

## QUESTIONS

an unjust system cannot last forever. There will be resistance, there will be a revolution. And words and stories and books will be the instigators for change.

5D

Will change be possible? Will voters believe in their governments or become disenfranchised?

ES

Change is always possible, even under the worst, heaviest dictatorships there is the seed of freedom, the seed of rebellion, growing quietly in the dark. It never ceases to exist, the possibility of a better world. But first we have to become more engaged, involved, caring citizens—both in the public space and the digital space. We need to connect and listen to each other. Authoritarianism succeeds when citizens become disconnected, compartmentalized, disengaged, atomized and ultimately, numb. We must break the silence. We have to overcome the narrative of numbness.

5D

What are the consequences that are slowly coming into focus?

ES

One of the biggest consequences of all the

changes that we are going through today is a deluge of negative emotions. We are surrounded with so many challenging emotions, and we don't know yet how to manage them, how to navigate our way through them: anxiety, anger, fear, resentment, hurt.... Unless we talk about our emotions openly and honestly we cannot achieve proper justice and inclusion. We have entered an era in which emotional intelligence will be all the more important. Sadly, populist demagogues have understood this fact way before progressives did. Do not suppress emotions, embrace and honour and share them, but also channel them into a more constructive force. ◇

# House is on Fire, Everything's Paused

What happens  
if you're mid-  
transition when a  
pandemic hits?

Lys Morton

Near the end of March, during an endless weekday evening, I pace in my basement suite. In the one-bedroom bachelor pad, it's a simple line. From the main door towards the cabinet, mini fridge, toaster oven and two Instant Pots that qualify as my kitchen; past the desk overflowing with paper and chords; around the coffee table. Make a straight line back to the door, pivot at the entrance, and pace it again. I'm quickly writing to friends, flipping back and forth between text messages, Snapchat and Messenger. We're all trying to sort out our various half-plans, our disappearing job opportunities, and all those summer adventures that now hang in limbo. What else is there for us to do, as the world around us comes to an unplanned halt? The movie theatre is closed, all our coffee shops shuttered; the libraries suspended service just the day before. Even our university is shut down, a bonus reading week as faculty scramble to switch everything over to online learning.

*Anything about the newspaper job?* one friend texts. I write back about an inside source informing me the newspaper is no longer hiring at the moment as local ad revenue plummets.

*What do you think's going to happen with grad?* another friend sends over Messenger. A few universities have already announced outright cancellations; our university has yet to make so much as a peep as to their decision for the convocation in June.

## CURRENTISH EVENTS

I copy the question and paste it into two text threads, as well as the other open Messenger window. Which route will the university take? A list of disjointed theories takes shape. Then the conversations creep back what is happening in the wider world.

*Just had my dentist call and cancel my next two appointments,* I type as the cacophony of pots, pans, horns and sirens begins to sound out through my neighbourhood. I have yet to adjust to the 7 p.m. show of support for health-care workers. In the middle of typing up a joke about finally wanting to go to the dentist only to have a pandemic throw a small wrench into that plan, my phone rings again. An unidentified number appears on the screen. The banging outside dwindles to a single pot coming from the hill overlooking my house.

‘H’lo?’

‘Hi, can I speak to Al— to Lys Morton?’ a voice asks, bearing the slightest edge of stress. I flinch at the near miss, that fraction of a second a name that isn’t mine is thrown at me.

‘Speaking, this is him.’

‘Oh.’ In the pause that follows, I imagine the caller surveying paperwork before stumbling through the next question. ‘I’m sorry, I was expecting a woman to answer.’

My question of the day: do either of us have time for me to break this all down? There must be more important questions to ask in the early weeks of a global pandemic. On top of that, is there ever



truly a convenient time to explain the mismatch of identity I present—the male voice and female name, the scruffy beard that scrapes across the microphone and the intake form with F written down?

‘Nope, I’m Lys. How can I help you?’

‘Yes, this is —’ The caller stumbles through the name of a clinic my doctor sent a referral to back in October. Following the call from my dentist, I can guess what I’ll hear next.

‘I was calling to inform you we will be postponing all appointments related to your hysterectomy due to COVID-19 and the recommendations made by the province.’

‘Yeah, I was kind of expecting . . .’ Now it’s my turn to stumble. Is the surgery really postponed if it had yet to even be scheduled? I’m still waiting for the call to book an initial meeting; I have no dates yet in my calendar to cancel. Now my year-long wait for this particular procedure is about to get longer. We are, after all, just in the beginning of a global crisis. ‘I was kind of expecting that.’

‘I’m so sorry, we *will* be in contact with you as soon as things return to normal. Thank you for your understanding, sir—miss—Thank you.’ She hangs up and I’m left with silence, a screen filled with messages as my friends continue to sort out this shifting world. I resume pacing my familiar route, wondering if I should grab my longboard and take advantage of the empty streets around my neighbourhood. I don’t have the energy to reply to any new messages. I’ll keep this new bit of

## CURRENTISH EVENTS

knowledge tucked away.

I've shared some of the ups and downs of my transition with my friends before; the seemingly unending legal name-change battle, the struggles of trying to figure out where it's safe to use the bathroom, the medical mishaps that are stacking up. But we were all in various states of anxiety with a much larger problem than my journey. Why bother them with the latest transition hurdle?

Friday of that same week, I'm on my way to work. Cleaning and maintaining the university's dorms is still considered an essential service. The first quarter of my shift is now dedicated to disinfecting every surface my team can imagine someone touching. Door handles, vending machines, the payphone that somehow remains in service, the sides of doors, stairway rails, every window crank that will be grasped as summer rolls in. All of it sprayed down with a disinfectant we're buying in bulk from a supply store in town.

Last summer I was stepping around students cramming in the common rooms, meal prepping in the kitchens, or gossiping in the halls. I was working with a team of twenty as we readied empty buildings to be used as hotels for the summer. Now I'm cleaning deserted halls and abandoned rooms with four other staff members. We spread out into different buildings, only catching sight of students if they're returning from the laundry or communal kitchen. A quick nod of the head hello, a nervous

smile or wave, both of us moving a half-step away from each other as we try and gauge two metres of separation.

I'm at the back of the bus, one of three passengers riding during the 7.15 a.m. rush, munching on an apple fritter. My phone vibrates, a call comes in from another unknown number.

'Hi, is this Lys?'

It's odd to feel a sense of relief given the current state of the world. My newsfeed is, after all, filled with growing unemployment numbers and rates of infection. Still, I exhale a breath I've involuntarily been holding at the mention of my own name instead of the one still attached to many of my records.

'Yeah, this is him.'

'Hi, Lys. This is —'

I recognize the name of the secretary from my doctor's office before she tells me she's from the clinic. Is there a doctor's appointment I don't remember booking? I assume it's about to be cancelled.

'I'm calling you on behalf of Dr G. He's a little swamped right now, as you can expect. But he wants you to know that due to the damage of your ribs we learned of in January—'

How does it feel like a year has already passed since January?

'—that you're classified as high risk for complications from COVID-19. You're not exactly more susceptible to the virus but ...'

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‘But a history of mucked-up ribs doesn’t exactly play well with a respiratory infection?’ I attempt a gallows-humour laugh.

She tries to match it; hers sounds even more forced than my own.

‘That’s right. Are you able to take measures to keep yourself safe?’

My measures? I take a bus to a housing facility of nervous students, I’m only ever able to get groceries after work with everyone else, and I have three cloth masks that just barely fit over the patchy beard I’ve worked so hard to grow. My list of ‘can’t do that or you’ll spread COVID-19’ seems to change hourly. The list of friends and family I might be putting at risk if we meet up is expanding. Now I’m watching my transition seemingly erupt into a trash fire; surgeries paused, the possible backorder of testosterone, and a name change that’s lost in the limbo of shut down government offices. I’m used to a state of flux while everything around me proceeds as normal. Now I’m the one paused, with no restart in sight, while the world tumbles towards an unplanned transformation.

‘I live alone, and school’s all online,’ I answer. ‘We’ll figure it out.’

Later that day, I read a *Vice* article that is quickly making its way through the various trans and queer spaces I inhabit on social media. ‘As Hospitals Prepare for COVID-19, Life-Saving Trans Surgeries are Delayed.’ I know the comments are going to be a

battleground. Still, I can't help wading into them, my lunch forgotten beside me.

*Chopping your dick off doesn't scream life saving to me.*

*We have way bigger things to worry about, focus on the issue.*

*I get it. Surgeries for cancer treatment are being cancelled and I'm low key freaking out.*

*Can our doctors focus on real things first??? We're kind of in the middle of something here.*

*I've been waiting for three years already. I'm scared.*

The last sentence begins appearing in messages from acquaintances. My phone buzzes over and over again in the apron I wear for work, which gets draped across the desk as I scrub at unknown substances caked on the underside. I take breaks from cleaning to send quick replies of support and tips to find resources that might help alleviate the creeping feeling of despair, trying to contact everyone I can think of to ensure they're still around to answer.

We are a community attempting triage.

I still have that article on my mind, am still sending messages out to check in on community members, when a friend calls in early April to see how I'm doing. We're all frustrated with the new distancing protocols. 'Y'know, the world's on fire,' I announce. It's a half-joke.

'The dog meme wasn't supposed to be this real,' my friend responds, referring to the

## CURRENTISH EVENTS

increasingly relatable meme of a dog sitting in a house as it burns, vacant look on its face as it says, 'This is fine.'

And then it all spills out: the cancelling of my hysterectomy, the call from my doctor once again reminding me of my loss of top surgery, and the most recent phone call informing me that my legal name and gender change would be on hold as offices close due to COVID-19. I'm not sure what else can be added to the transition trash fire, I try and joke.

When that falls flat, I start to echo the numerous texts I've received these last couple weeks; over and over again the message of 'I'm scared.' My friend, in an attempt to ground me, asks what I'm scared of. What boogeyman, in this new world, is now calling my closet home?

'ID,' I reply.

Like most people unable to shelter at home, I struggle with the fear of getting sick. Whether it's from the bus I need to take to get anywhere around town, the rooms I'm cleaning, the supplies I don't know who else has handled, the grocery stores I rush through during my bi-weekly shopping, and the contact with strangers I can't avoid while running errands. There's the fear of having to lock myself down once again and wait out the two weeks of quarantine alone. I see these fears echoed on various social media timelines and in conversations with peers. We all seem to have some variation of these particular boogeymen.

But it's the prospect of ending up in the hospital mid-transition, my gender and identity up for debate, that puts me in a camp different from others. Without anyone there to advocate for me as I try and draw breath. Without a way to declare my name and identity as a tube is threaded down my trachea. Without anyone to make it known that the name on my student ID card, my library card, my Costco membership conveys more truth than the name on the driver's licence. Unable to speak, to explain a driver's licence with a picture of me and my patchy beard, my squared-off face, and an F squatting just to the right of that picture.

An F that better stands for frustration than an identity, a symbol of dysphoria, as if somehow I've been failing this whole gender thing since the very beginning. The F is a letter I've been struggling to change for close to two years. My request to change the letter and the name gets repeatedly yanked back and forth between provinces as each new phone call and email informs me how I'm going about all this the wrong way. Both need to be changed in Alberta, but you can mail in the info. No, you have to be in person to change the name, but the gender can be mailed in. Didn't anyone tell you? The name has to be changed in the province where you now reside. *They'll* inform your birth province about the change. But you need to mail the gender change and the name change and the old birth certificate together along with your fingerprints record. No, they still need to go to different provinces, but you

## CURRENTISH EVENTS

have to mail them together.

These hurdles are difficult at the best of times. Maybe I'll laugh someday about my first F grade appearing on my birth certificate. But I can't let the pandemic be the reason it stays there for good.

With that F on my records, I fear passing away surrounded by strangers who would only know me by a name that isn't mine, wouldn't know me as the man I have spent years fighting to become. It's not a unique source of fear for most trans individuals. How many of us in the community have dreaded what will happen to us after our death, after we relinquish control? Have feared being buried in the wrong clothing and under the wrong name. Have tried to find ways to make sure our identity would be known by the strangers who might accompany us during that final transition.

Under all these fears is the notion that I will die and be buried (perhaps cremated) in a body I have not felt at home in since the early days of grade three. This particular house has been on fire for well over a decade now. Like that cartoon-dog-surrounded-by-flames meme my friends and I half-laugh at, I've come to accept the current state of the house as I wait for relief. *This is fine*. A few months ago I thought I heard sirens heading my way. But they were diverted, understandably, to a much larger house on fire.

I'll wait. In the growing heat of summer, I'll don sweaters to cover the shape of a chest that does not match my face. When I attempt a swim at the



creek with friends, I'll wear multiple shirts and baggy jeans to hide hips that don't exactly proclaim 'male'. I'll be thinking through every activity that might still be salvaged this summer. I'll have to predict which ones require ID and will have to be skipped, as my beard marks a stark contrast to the info on my driver's licence. I'll muscle through the pain of a near-monthly cycle that refuses to quit, wrapping myself around a heating pad after a sweltering day at work and going through pain meds that offer a slim chance of any relief.

I understand that I have to wait. But like so many things we're losing during this crisis, I still get to have a moment to mourn. Am I allowed a bucket at least? To toss water on this trash fire of a home?

It's the first week of June, and I'm set up in front of my computer. A passably nice button-up shirt, a dinner vest, my hair wrangled into a style one might consider fashionable. I'm camera ready.

Shortly after my school year ended, news about Pandemic University rolled in. A collection of writing courses to help Canadian writers with financial loss, hosted over Zoom to all of us eager to partake. And tonight is our wrap-up ceremony.

There's still no word from my university as to future plans for convocation. For now, it's postponed indefinitely. I'm more than happy to use this 'fake university' party as a stand-in for the one I'm missing.

Retired news anchor Peter Mansbridge is

## CURRENTISH EVENTS

brought onscreen to give the Commencement Address, a journalist legend I grew up listening to on the CBC. We are told he'll take questions at the end, and my fingers shift to my keyboard. I can't ask him outright what I'm supposed to do now that my graduation, my first journalism job, summer plans and transition are now overwhelmed by a global event. Or can I?

'What advice do you have when personal large events are being heavily overshadowed by world-shifting events?' My voice cracks, jumps, and drops with anxiety and the shifting shape of my vocal chords due to testosterone.

Mr Mansbridge's answer aligns more with the state of journalism, and I take notes for the day I might need this info for the job world, but I'm still hopeful for something that might put me at ease with the long pause and burning house.

'These things are difficult,' he concludes. 'But that's why you need not only the belief in what you're doing, but the understanding of those who are in your family.'

This I can work with. It's a small bucket of water. And it pairs well with the envelope I've received in the mail. The world is broken, the process is stalled, my body is caught in-between, but letters still arrive. One of them was a larger-than-normal brown envelope with government crests stamped in the top left corner. Printed on the label was the name I'm doing everything I can to remove. It's never an easy name to look at, especially on a

government document.

I tore it open and retrieved a single sheet of paper, then quickly crushed the envelope printed with the dead name and tossed it into the recycling. Why spend any longer with the name on the envelope when I could stare at the name boldly printed in the middle of this very pricy piece of paper? It's comprised of only three words, but each one holds a joyful permanence. I snapped pictures and sent them to half a dozen friends and family. I wanted them to know the exact moment of its arrival.

Now the piece of paper sits on the corner of my desk. A part of me is scared that if I put it away it will no longer remain real. Throughout the rest of the celebration I keep glancing over in overwhelming relief at my glossy new birth certificate. It reads: *Morton, Lys Aaron*. And in the lower right-hand corner, *Sex: M.* ♦

‘One of the challenges of the book was how is it possible to write about whiteness?

To make it apparent, to show it, make it show itself’

Sarah Elaine Smith  
on race, rural  
America, and  
*Marilou is Everywhere*

I n Sarah Elaine Smith's new novel, *Marilou is Everywhere*, a young woman from Deep Valley, Pennsylvania, goes missing. Jude Vanderjohn is smart, beautiful and seemingly capable of a secret life. She's also mixed race, which becomes a factor as the search unfolds, a search that might not be as exhaustive as it would have been if Jude was white. The narrator of the novel is Cindy Stroat, a younger girl in the community who, along with her brothers, has turned 'basically feral' since their mother took a leave of absence. The summer Jude disappears, Cindy views the world newly aware of its threats, temptations and dangers. She's drawn towards Jude's family and sees for herself a spot in the ramshackle Vanderjohn home. She begins to slip out of her own life and into the space Jude has left behind. 'I stood in the place where Jude was supposed to be,' she thinks. 'And this, I thought, was a kindness.'

Sarah Elaine Smith grew up in Greene County, Pennsylvania, and depicts the rural United States in rich detail—not just the 'stony light' that falls in the hills and makes 'the vines and mosses a vivid, nightmare green'; not just the 'rainbows in oil puddles'; but also the unspoken customs, the small-town small talk and the complicated shapes racism takes in a predominantly white community. Hers is a novel about whiteness, about life on the margins, and why some lives seem to matter more than others. 'To be honest, we just weren't looking that hard,' Cindy admits. 'Nobody knew where to search and it was

## Q&A

summer vacation anyway—but that wasn't the real reason nobody looked for Jude.'

*Five Dials* spoke to Smith in May from her home in Pittsburgh, Pennsylvania, about the novel and the state of Appalachia in these turbulent times of face masks, rebellion and protests.

5D

Can we talk a bit about the disappearing girl trope? When did that become important to you?

SARAH

One of the things about the missing girl trope is that our relationship to those kinds of stories is a lot more complicated than it first seems. We want to protect innocence and we consider young womanhood to be an avatar for that. But there's actually something a lot more dark and curious about the fascination with those stories. It may have more to do with Cindy's means of idolizing the disappeared person, or the kind of reverse fame that you get from being taken out of your life in some way. I noticed around 2012 or '13 that I was fascinated and I started to get a little bit suspicious about why I was so into them.

5D

The novel brings up the question of how we search for the missing. Why are some people searched for? Why do some people disappear? This, of course, ties into the importance of race in the book.

SARAH

Actually, that didn't come in until a little bit later. I had done a few drafts of the book before I realized that that was one reason why this narrative happened in this specific way. One of the things that's important about the question of who gets searched for is that in the case of what happens with Jude, a lot of the people in the community of this book would say, 'I am a good person. I'm not racist. I'm not like that.'

What they might mean by that is, 'I don't use racial epithets and I've never harmed someone physically who is a person of colour.' They mean, 'I've never done these really overt forms of racism.' But people in this community can't get in touch with the reality that Jude is missing and that her life is important and is worth valuing and cherishing. The fact that they can't get there is one of the most horrifying things in the book.

What I find so fascinating about crime stories and tropes from narratives like popular fiction and television is that we have this huge

## Q&A

appetite for a certain kind of story because it reinforces some sense of innocence for us. If you're the person who's reading the disappearance mystery story you're not the bad guy, by virtue of the fact that you're reading it.

You get to imagine yourself to be on the side of finding the person and you get to imagine that there is a wrongdoer, an evil person, and we'll find the evil person and deal with them. It's a way of getting rid of all of this societal burden for why these crimes arise in the first place.

### 5D

The racism that you describe in the novel exists in a hazy way between the residents. In one section you describe untransformed racial attitudes. 'Her disapproval met in the air with the disapproval of whoever she was talking to and the two silent moods married and had their own life in the air over us.' It doesn't need to be said. The residents never have to say what they actually mean. Nothing is real if you don't have to say it.

### SARAH

There are all of these ways in which whiteness is invisible to white people. One of the challenges of the book was how is it possible to write about whiteness? To make it apparent,



to show it, make it show itself in a book that is told by a white narrator. A lot of what I hear other white writers say in their own defence of why they don't write about race is, 'Oh, I'm from this almost all-white place.' 'There weren't many people of colour where I grew up, so it's not part of my reality.' As if whiteness isn't involved in race. There's a way in which whiteness continues to hide its tracks in the mind. What could make it visible as an action that you're responsible for?

It became really important to find a way to show that this is powerful, because racist assumptions are powerful because they don't have to be said. Certain attitudes can be presumed to be shared amongst white people. Not having to articulate those attitudes is one of the things that empowers them to keep existing.

One thing I started doing in my regular life was questioning other white people when they would say something that had a dog-whistle echo in it, or some kind of reinforcement of white supremacy. Even if it was a really subtle thing, or just a person saying, 'Oh, I hear you're moving to Swissvale. Isn't that neighbourhood, you know, a little rough?' I started asking, 'Oh, what do you mean? I don't understand. Could you tell me what you're saying?' And the thing is, they could. They don't want to. It becomes

## Q&A

horrifying if they say it.

5D

So when it's made real, it becomes something else entirely?

SARAH

That's the very root of the question. What happens? What harm comes from refusing to see yourself?

5D

Speaking of the community, the setting of your novel, Greene County, is active in shaping the lives and the bodies of those who live there. One of the sections that stood out describes how 'those who stuck around picked up enough grit and crud and survival skills that they often could not be told apart from the rest of us who were bent into catastrophe postures.' You describe the aloneness, well-intentioned social workers, post-industrial blight. How does this landscape transform people so severely?

SARAH

One of the most powerful features of where I'm from in Appalachia is the story that you're given about who you are by everyone you grow up with. And by everyone in the world outside of you, too. The most potent version of

that, and maybe the most visible version, is the way the gas and coal industries come into this area and take all of the wealth out of it from under your feet, from literally under your feet, and destroy the places where you live. This has been happening for a long time, ever since the initial theft of the land from First Nations people. It is inherent in some ways, the ways we've been given to understand ourselves and who we are in relation to this place. And those stories are so powerfully reinforcing that they become difficult to defy. Difficult in the sense that if you want to be a little bit different than everyone else, it just has to get smacked down right away, you know?

And if you want something for yourself, then you're being uppity. And if you want to question what someone else is doing . . . There's just a reified sense of who we are and how we're supposed to be. And some of it comes from inside the place, and a lot of it comes from outside the place too because Appalachia is, I don't know, America's armpit or something.

Whenever somebody needs to write a think piece about who voted for Trump, it's common to find some version of that, some cartoonish picture of Appalachia, when Appalachia is a lot more diverse and subtle and interesting. A lot of the pressure in that description crushes you into a catastrophe

## Q&A

posture. The pressure of all of these repeated stories and the ways that they demand you act. After long enough, it's hard not to believe someone else's story about you.

5D

Do you have memories of growing up and seeing the way that this power worked on people physically? Could you see it in their bodies?

SARAH

One of the main ways I saw it when I was growing up was: it holds you in place, right? It can nail your feet to the floor if you don't pay attention. That's a little bit arrogant of me to say because it assumes everyone wants to leave such a place the way I did. Not everyone wants to leave. Not everyone would agree with me about that. But as someone who did want to leave and someone who felt very obviously outside of the mould, I could feel this force field that wanted to keep me in a very certain shape and in a very certain size too.

I probably feel that pressure in a different way because I'm sort of like a halfling of Greene County. My family isn't from there going back a long time. I'm from there because I'm not from anywhere else, but I'm not from there in the same way that people's whole families have been there since the

1800s. So in a sense, no matter what, I'm still kind of an outsider there. And I think that my take on it probably reflects that.

5D

On the page, Greene County seems like its own universe. The cell phone reception peters out. The deer hunting season takes place around you. It seems timeless. Classic rock plays on the radio. There's this sense of going into a setting that's apart from the modern world. Was Greene County in any way exaggerated?

SARAH

To this day my cell phone doesn't work at my parents' house. If you want to use your cell phone, you honestly have to drive out to either the gravel pit or the cemetery and stand there in the middle of the headstones.

I tried to make it just as absolutely straight up and down true to the place as possible. As someone who's been writing about Greene County for a while, I noticed in fiction workshops people would say, 'I just don't think this is very believable.' I have a little bit of weariness with that. Actually, a lot of weariness. And that's part of what I mean about the story that other people tell you about where you're from and who you are.

A lot of the time, totally innocently

## Q&A

and without meaning to do this, readers can become pattern recognition devices and say, 'Wait, this portrayal falls outside of my parameters for what a working class person sounds like or what their thoughts are like. And this falls outside of my parameters for realism.' I think realism is just really different in Greene County. Deal with it.

So yes, all of that stuff, the deer hunting with the spotlights, it's all 100 per cent from real life. One of the things I find most gratifying is when people from Western Pennsylvania say, 'This book is just so this place.' The pepperoni rolls, the Sheetz gas station, the Giant Eagle and the Single A wrestling and all of that stuff. It resonates and I'm glad it does.

5D

You seem to take pleasure in some of the small interactions of small-town life. There was one line that stood out. 'Many were scandalized. And by this I mean delighted.' Were you always aware of these resonant small-town interactions?

SARAH

I find it so fascinating and so compelling how we've evolved a way of talking to each other that is the accepted way of seeing things. Or that there's a script that you're supposed to

follow. You're supposed to say, 'Oh, isn't it terrible about the Vanderjohn girl?' Like, oh yeah, it's terrible. But something else is going on in the group mind.

Appalachia is a place where it feels like there's a kind of collective consciousness in a way that doesn't necessarily make sense to people outside of it. You get hungry for details about everyone and report on them and start to think that you know everything that's going on with everybody else. There's a real false omniscience to it.

5D

At one point Cindy says, 'This is what makes me true rural.' What would that mean to a British reader?

SARAH

One version of what that might mean is just this feeling of intimacy with nature and with the setting you're in.

Another is when a car pulls up. At one point in the novel, a car pulls up unannounced at Jude's mother's house. It really is akin to coming in someone's front door and picking up a pork chop and eating it. Your space extends outside of your house. And if someone drives by and they slow down a little bit, you're like, 'Who the fuck is that?' You get used to this idea that your space includes more of the

outer world then than it might in the city.

5D

There seems to be a deep sense of rebellion in the book. Characters do not like to be told what to do. 'I'm living this life. This is mine.' Do you see that tying in with this current phase of rebellious behaviour, of people storming government buildings to express their rights?

SARAH

This actually is about a problem of not being able to sufficiently imagine somebody else's reality. That problem can get worse whenever you're used to only seeing the ways that your decisions affect your immediate vicinity. I remember in high school when people would talk about race, they were kind of talking about it like it just didn't exist here. And if they ever encountered it, then maybe they would see how they felt about it. But it's just not real because they can't see it, you know? That's the real danger of insularity. Whenever you replace what else is out there in the world with a picture that you have or that someone else gave you, then it's difficult to imagine other people to be as real as you are.

Instead they become cardboard cut-outs and you're the real one. I think that is completely what's happening with people



refusing to wear masks during the pandemic. The mask is, to me, the act of ultimate humility in the sense that I accept that I don't know if I have this disease, and I accept that I don't know how badly it could hurt somebody else. And so I accept all of those things which are hypothetical and not immediately visible to me. I agree to treat that reality with respect.

One of my fantasies for America is that we could have some kind of mandatory public service term of, you know, two or three years after high school where you have to go and live someplace else with people that you wouldn't mix with. You do some kind of public works project. And then, after that, you go back to whatever you were going to do. I think the lives of a lot of people I grew up with and went to school with would be completely different if they had genuine in-depth experiences with people unlike themselves. That's really what changes when you go from the city to a rural place. It doesn't do anyone any favours to just decide that people in rural America are stupid and brutal.

And then, on the total other end of the spectrum, there is something really delicious about a sense of defiance because it's the last thing that you can have. It's a thing that no one can take from you—your sense of will.

5D

Is it possible to survive without getting away? Jude chooses to survive and escape at the expense of others. Cindy tries to make a similar decision to save herself, but misjudges her escape route.

SARAH

The braver thing is probably to not try to escape. I believe people are capable of living together and getting past their misaligned visions of the world. I really do believe that. It's an exhausting project to contemplate—and challenging. I don't really know how you would do it either, which is maybe why the book is not able to imagine that yet. But yeah, I have to believe because I want this to be true in the world—that it's possible to survive and not escape.

It's been my experience that prolonged exposure to other people makes them very dear to me. That happens through no function I can figure out, except seeing them on a good day and then a bad day and seeing them do something kind. I'm always amazed whenever I start at a job. I think, well, I don't have to be friends with any of these people. It's fine. I'm not trying to. And then somehow, along the way, I know all of their pets' names. I know what foods they're allergic to.

This is one quality of Cindy's that is

actually really hopeful for her—her hunger for other people and her curiosity for them. It gets, in some ways, a little tarnished, when she's just paying attention to them and just seeing them as fascinating, like jewels of being.

5D

What about other depictions of small towns? How important has *Twin Peaks* been to you? Is it always there in the background of your mind?

SARAH

Absolutely. *Twin Peaks* is probably my number one artistic influence of all. It was on when I was really little. My parents loved it and I remember seeing it, not understanding it, obviously, but I remember sort of the mood of it. I also remember that whenever my parents would go someplace that had kind of a strange vibe, they would say, 'We're in the Black Lodge now.' So I had a sense of the story, the mythos. It's another example of the missing girl trope and maybe the first place where I saw it and thought, wow, you can take this trope from popular culture and use it as the container to carry something a lot more ambitious and strange. I love that idea.

5D

In Lynch's book on meditation, he discusses

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the idea of bringing ‘big fish’ up from the deep of the mind. With this technique you don’t question or tamper with the ideas, knowing that they’re powerful. You smuggle them into works of art.

### SARAH

That is my MO completely. The book knows everything. It’s like I’m its little hobgoblin, you know. I do its bidding. I’m here to listen to it. It always has known more than I do. That’s just the relationship that I have with the book. What I’m really doing is collaborating with an invisible collaborator and the challenge is to trust it and to get out of the way instead of saying, ‘Oh no, please, I don’t want to write a book about race in Appalachia.’ You know what I mean?

‘I don’t know.’ ‘I don’t want to get this wrong.’ ‘I’m afraid of getting this wrong.’ ‘I’m afraid of writing this character that’s so despicable in some ways.’ Just putting aside the discomfort and fear that my ego has to say, ‘OK, book, you’re the boss. I’ll do it.’ And to trust what comes out of that. The material that comes out of that kind of collaboration is richer than what I could come up with if I sat down and thought really hard, which never works out very well for me, honestly.

5D

How does that work mechanically? Do you just allow imagery, lines, whatever, to come to the page?

SARAH

If I'm trying to write something and I can feel effort—I can feel my own unwillingness to let something be strange, or ugly, or whatever, I can feel myself hesitate—I stop writing and think, why did I stop? Because whenever I stop, it's usually because I'm trying to bargain, or trying to soften, or modulate. I think, oh, I don't want this to be weird. Why is this so weird? Why is everything I write so weird? Please, no. It really is a process of listening. To me, there's not really anything like writer's block. There's just writer's judgement.

So there are always moments where I can feel the hesitation. And if I'm really honest with myself and I ask myself, do you know what the next word should be? the answer is always yes. I already know. And then I write it down. I trust that if I listen well enough, the right thing will be there. And it's up to me to trust it, and develop the discipline to empty out and listen. It's weird, but I guess that's why I'm meditating so much. ◇

ONE POEM

Sam Riviere

[73]

Once nobody in town would touch it  
A forbidden precinct of expression  
Now the disembodied are attracted to the power vacuum  
There are spirits in the kiosk  
Rich friends with dark opinions, suspicious of the boycott  
In sepulchral apartments their views sound placid  
Inspiring individual awe for a public necrology  
Its heavy garland flowers a dream world  
Watching lightning striding up the Thames  
In a description of the present, or the actual present  
And we were protected by a sort of baroque realism  
The crowd that fucks with us is a clever man

‘Modern medicine is brilliant. But we’re not good at keeping people from falling off the cliff in the first place.’

Dr Jeffrey Rediger  
on spontaneous  
healing, our current  
crisis, and why  
forgiveness is good  
for the body



Why is it that we, as a society, don't pay more attention to stories of recovery? Why do we ignore examples of healing that don't fit our paradigm of one cause, one cure? In his book *Cured*, Dr Jeffrey Rediger investigates spontaneous healing and recovery and examines the common denominators of those who have beaten the odds. What happens when we listen to these individuals and learn from their experiences? Is it possible to strengthen our defence systems, especially in this time of COVID?

Over the course of a seventeen-year search, Rediger met individuals who experienced an array of spontaneous recoveries. One was diagnosed with an aggressive form of pancreatic cancer, another a lethal brain tumour, while yet another was faced with the debilitating inflammatory arthritis known as ankylosing spondylitis. These recoveries are rare, but Rediger refrains from classifying them as flukes. Common attributes emerged. Each person profiled in the book chose to break with behaviours and patterns, and in one way or another discovered the body's capacity to heal.

Rediger fluently conveys recent research, some of it yet to filter down into the A and Es and GPs' surgeries. He describes these surprising cases with care, but without an undue sense of wonder, never abandoning the righteous suspicion of the qualified doctor. The individuals in the book are not superhuman, nor is spontaneous remission a ticket to eternal life. But instead of looking at them as lucky

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aberrations, Rediger argues for examination. In the history of medicine, we have almost never used the tools of rigorous science to investigate remarkable recoveries from incurable illnesses. Now seems like a good time.

Dr Rediger is an instructor in psychiatry at Harvard Medical School and medical director for the McLean SouthEast Adult Psychiatric Programs. *Five Dials* contacted him in Boston in mid-April, 2020.

5D

How did this investigation into spontaneous recovery kick off?

JR

In 2002 an oncology nurse at Mass General in Boston came to me and asked me to help tell her son that she had been diagnosed with pancreatic cancer and told that she had only months to live. We did that.

Then she went to a healing centre and began calling me, saying she was seeing some amazing recoveries and she wanted me to look into it.

I had just recently graduated from residency. I was a new medical director at McLean and on the faculty at Harvard. I doubted anything was going on, so I said no. But she was persistent.

She began having people call me from around the country and elsewhere saying they had medical evidence for their recoveries and did I want to hear their stories? I said no. But after a while, as these envelopes were mailed to me, I began to see that there were some stories I couldn't explain.

It's a complicated area of research. Many of the stories were complicated by chemo, radiation or other factors. But there were some stories I just couldn't explain. Something mysterious was going on. So I began to look into it. It was a very slow journey for me. This has been seventeen years.

I had no idea how powerful the socialization method is in medicine. When you go through med school, they tear you down and rebuild you. You end up with a very specific and powerful way of perceiving disease and health. People who go to med school and into health-related fields are socialized into this process.

I'd been to Princeton Seminary. I have always been someone who asks questions. Questions have driven me my whole life. In med school, I would go up to a professor after class and just ask questions. I remember one response very clearly: 'Don't ask questions. Just memorize the problem set.' That was very much the approach taken: 'There's a lot of information to absorb, and a lot of things to

memorize.’

Certainly it’s true that becoming a physician is about absorbing and learning a great deal of information. But it’s also true that by learning not to ask questions very devoted, bright people are socialized into a process where we no longer examine assumptions or ask whether this is the best way to do things. It took me a long time to begin seeing this clearly.

5D

In the book you examine other forms of healing alongside modern medicine. How important it is to acknowledge both the successes and limitations of modern medicine?

JR

Modern medicine is brilliant in so many ways—in the acute situations, in keeping a person alive with coronavirus. I’m seeing everyday heroic efforts by doctors and nurses and respiratory therapists who are able to keep a person alive until they can recover enough to start breathing on their own again.

For example, at Good Samaritan Hospital, right now we have created a second ICU, a second intensive care unit, and transformed outpatient services into more inpatient beds. We have obtained more ventilators and are now using twenty-four of the thirty we have. All of our units are with

COVID-positive patients at this time except one. We believe we are at our peak. We are keeping people alive who will survive, but who can't breathe on their own right now. We're seeing all kinds of things like that. So modern medicine is brilliant in that way.

One of the analogies I use sometimes is that modern medicine is a long line of ambulances at the bottom of a cliff. We are brilliant at picking people up and taking them to the hospital when they've fallen off the cliff and have an acute problem, whether it's diabetic ketoacidosis or hypertensive emergency, a stroke, heart attack or colitis – all kinds of things.

But we're not good at keeping people from falling off the cliff in the first place. The illnesses that consume most of our general medical costs are chronic illnesses. Heart disease, diabetes, cancer, autoimmune illness and lung disease—those five comprise over well over 70 per cent of the health-care dollar.

If we put guard rails at the top of the cliff, we would have a whole different system of medicine. That's what *Cured* is about—looking at people who did fall off the cliff, but found a way to climb back up. They found ladders that work. The pillars of health and well-being that these people applied more intensely are the same principles that keep us from falling off the cliff in the first place. So that's how

## Q&A

my thinking has evolved as a result of being exposed to such incredible stories.

5D

It seems you walk this line between deep respect for the established medical world and deep frustration that these cases of spontaneous healing are not being taken seriously.

JR

It's very true. I love medicine. I spend my days in both an acute care psychiatric hospital and an acute care medical hospital. I love that acuity and seeing people get better so fast. I love the intensity of what we can do with technology and medications to save people's lives. But we are missing something. We have been taught to exclude the story of the person in order to penetrate through to the underlying signs and symptoms of illness that are present in anyone who has that particular disease. As a doctor, I've been trained to make a diagnosis and start a medication. But when you listen to people you see that understanding their individual story—what's really going on in their lives—plays a massive role in making sure they get what they most need in order to genuinely heal.

5D

How did the act of listening change for you as

this process unfolded?

JR

I have begun to understand that you need to see the person. It's so meaningful to me to experience the person in their wholeness, not just, 'We're trying to go in and, in a matter of minutes, exclude the story, ask about symptoms, and then get out.' It doesn't take any longer to try to understand what the story is and understand who this person is. Underneath everything, what is really going on here?

The questions we ask are very important. Eighty-five per cent of what comes into a hospital is stress-related, but we don't ask about that. If a person's having a heart attack, they're having a heart attack for a reason. The same is true if they're having a stroke, or if their blood pressure is 200 over 120. Symptoms do not just come out of the blue.

When we ask, 'It sounds like you've had a lot of stress in your life recently. What's going on?' patients relax, nurses then can relax and doctors are relieved because they can find a path to discharge. But these are not the things that we're taught to ask about.

5D

I recently spoke to a few nurses in New York who are involved in this current crisis. Because

of the overwhelming number of patients coming in, the amount of listening they can do at the beginning of a consultation is so short. Instead of asking four pages of questions, it's one page. They're not getting a chance to hear about these people.

JR

I bet so. But what we can do is just say, 'You must be under a lot of stress. What's been most stressful recently?' That takes so little time and helps you understand what they're dealing with. It often changes the complete approach to treatment. Then you can move on. This also establishes a critical connection with the patient and it's much easier to make sure they get what they need.

5D

Some of the stressors you describe in your book almost become characters unto themselves—a rogues' gallery. One, of course, is chronic inflammation, which you define as a kind of erosion. How could you describe the ongoing effects of this erosion?

JR

As doctors, we're trained in body parts. If you're interested in the heart, you're going to become a cardiologist and study the heart. If you're interested in psychiatry, you're going



to study the brain. Gastroenterologists will study the GI tract.

But it's not the cholesterol that's driving the problem. It's not the blood pressure that's driving the problem. A person doesn't have a problem with diabetes. More fundamentally, it's the chronic inflammation in the body that is wearing your body and immune system down. After a while, whatever part of your body is most vulnerable, either genetically or in terms of lifestyle, is the part that's going to manifest disease first. And once one body part begins to wear out, more are often soon to follow.

Chronic inflammation is a lot closer to the real cause than we've been taught. When we stand back and look at the forest instead of just the trees, 'Oh, we've got to reduce chronic inflammation in your body. That's going to change the trajectory, not only of your diabetes, but also of your heart problem and all these other things.'

5D

The book contains some surprising research. One line that jumped out for me was that forgiveness is actually good for your body.

JR

Most of us live in chronic fight, flight or freeze. Any time that you're in that

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sympathetic state on a chronic basis, you're not going to heal properly because you're going to be flooding the immune cells and all of the cells in your body with stress hormones – cortisol, norepinephrine and adrenaline, for example.

And what happens if your body's getting flooded in these stress hormones? Your cells become numb and sluggish. All these brilliant cells and cell subtypes that want to kick out infections, kick out the coronavirus, keep your heart healthy, kick out the mutating cells that become cancer? For that to occur, your immune cells need to be healthy and vital. But that's not going to happen if they are constantly flooded with stress hormones. Chronic inflammation is the immune system gone awry, which is the basis for most disease.

So getting out of fight or flight is important, and genuine forgiveness is one important way to do that. Doing so gets you out of fight or flight, and into a parasympathetic state that fires up your vagus nerve.

When you smile or when we make eye contact, it is the vagus nerve doing that. This helps move us out of fight or flight and into a state of connection, love and compassion. And that means your beautiful immune cells are bathed in a very different neurochemistry. Dopamine is the

pleasure pathway. Serotonin is the feel-good antidepressant molecule that psychiatrists work with a lot. Endorphins also help with pain and mood.

This is a very different neurochemistry, and your body loves it. Your immune cells light up. They become active, healthy and vital, and are a lot better at kicking out infections. They eliminate inflammation instead of creating it.

5D

I'm glad we've introduced another compelling character from the book, the vagus nerve.

JR

Vagal nerve research is actually helping us see Darwin more completely. We talk about survival of the fittest and we think that's the way we're wired. Even Darwin knew that isn't true. The vagal research shows us that our highest and most evolved strategies have to do with connecting with people rather than competing.

Our physiology wants us to connect, smile and light up when we see people. In *Descent of Man*, Darwin mentioned survival of the fittest twice and love ninety-five times. That's really different. Even he understood it. But we didn't get it. We just took the part of him that we understood.

5D

Obviously, the spread of COVID is a tragedy. But we've also seen a flowering of kindness and solidarity. Neighbours are compelled to be there for each other. Is there a positive to what's happening now for our vagus nerve?

JR

I think so. This is a massive opportunity for all of us to improve many aspects of our lives, both individually and collectively. It'll be interesting to see what the research is that comes out of this, but even my colleagues, we're spending our nights, our weekends together. We're busy moving the hospital and a lot of our doctors and social workers to telemedicine. So we are connecting outside of work hours. We're doing Zoom and seeing each other's homes and hearing the barking dogs, seeing what kind of books they read, all those kinds of things that we didn't know before. We have a different kind of social contact over Zoom that's very connecting and, I think, very loving.

5D

In another section of the book you mention how our perceptions of placebos are changing. We take a placebo and, on some level, we feel cared for. A placebo pill is inert, but there's this deeper unconscious part of us that feels

cared for and the body responds accordingly. It allows us to tap into the idea of tacit knowledge.

JR

Michael Polanyi was a philosopher of science and a chemist who wrote about how when you learn to play a piano or ride a bike you have to focus on learning all those little parts. But at some point that transitions and you focus on the meaning of what you're doing. If you start to focus on the parts again, you're going to get screwed up.

It's so fascinating to me that with a placebo, even if you know you're taking a placebo, you can still get better from it. Even if you know it's a sugar pill. So that means that there are subconscious pieces to all of this, whether it's that we feel cared for, or that it's a tradition that we feel we trust to be used for our benefit. There are these unconscious beliefs that are very powerful, and that are just waiting to be tapped into.

5D

Could you expand on the idea of the DMN?

JR

Yes. The Default Mode Network. This is a new and growing area of research. We develop these very efficient lives where we have

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all of this tacit knowledge that we rely on. For example, I often will drive to work and won't remember all I did to get there, all the times I used my turn signal. My default mode network gets me there because my neurocircuitry knows the patterns so well that I don't need to focus on them.

This is all great, but when the default mode network becomes the neurocircuitry that keeps us from experiencing ourselves in a new way, then that's a problem. One of the most common things that people have said to me over the years is that it took an illness for them to wake up and realize they needed to stop taking care of everyone else. They needed to stop responding to the perceived expectations of others and focus on a life that created well-being and authenticity for them, where they felt like they were living a life that meant something to them and not just responding to everyone else's expectations.

What does it take to get out of that default mode network when we have this neurocircuitry that's very accustomed to thinking about ourselves in a certain way? Or thinking about the universe in a certain way?

Sometimes to get better this has to change at a deep level. I can't tell you the number of people I've talked to who changed at a fundamental level, sometimes to the

point of changing their names, or walking down a street and realizing people no longer recognized them.

For them to get healthy, that's what they had to do. Whether it's leaving a toxic relationship or a job that was depleting them every day. Getting out of that default mode network and finding a more authentic way of being who they are.

Different things work for different people when it comes to getting out of your default mode network. Dance sometimes is really important. A spiritual practice can do that. Sometimes I tell patients to not use psychotherapy if it just reinforces all your biases and keeps yourself in the world that you're used to because you're afraid of finding a different way of experiencing yourself. It's often used for that. We find ways to keep ourselves in the same world.

The worlds of the arts and science are coming together. People in the liberal arts, or people who have been meditating for years, or people who are into dance—they've known some things. Artists know things that are astonishing to me. It's nice that science is finally catching up to that.

5D

Why is it important to gain the mindset of conducting our own health experiments?

JR

I'm interested in the democratization of medicine. And in the democratization of psychiatry. For thousands of years, we have had deficit-based views of being human in all of our major institutions.

In psychiatry we reduce human problems of living to neurochemical defects. And that may be part of it, but it's not the whole story. In my experience, it's not even the main story. In medicine we reduce everything to the disease model, to what's wrong and missing with a person. In psychology we reduce everything to childhood deficits. In religion we've reduced things to original sin instead of emphasizing that every person has this divine aspect to them that is deeper and truer than anything they could possibly do wrong. I think the truth is every person brings something unique and good into the world.

After watching these stories for so many years, I am convinced that what it takes for people to get better is to begin seeing and experiencing themselves differently. See what's right and focus on that rather than exclusively on what's wrong. There's nothing wrong with us that can't be fixed by what is right and good about us. This galvanizes hope or something positive that can carry a person through a rough time to a point where they see things differently



and make different choices.

5D

Is a moment of crisis and pandemic a time when that process might be able to happen?

JR

Yes, I think so. The human spirit is irrepressible. People are doing beautiful things. Someone left a package of surgical masks on my porch at home. This can be a time for reflection and renewal. A time for reordering our priorities.

But let's face it. There's also a lot of painful stuff going on. I see loved ones drop off their ninety-year-old mother and they can't go in and visit her in the hospital. They don't know if they're ever going to see her again. Sometimes they don't. Sometimes these people are too old or too confused to figure out how to use FaceTime, or even sometimes too weak to pick up the phone. People feel so alone. And then the doctors and nurses have to leave the door closed, and when they do briefly come in, they are all gowned, gloved, masked and goggled up, standing across the room. So the person can feel even more alienated and alone. So there's a lot of tragic things going on. But there's a lot of beautiful things going on as well.

5D

Explain the image of burning your boats.

JR

There's an old story that a general and his army landed on an island with a mandate to take the island, even though they were vastly outnumbered. What did the general do? He told his officers to burn their boats. In this way, they had no choice but to either take the island or die. It changes the psychology and puts change in your favour.

This image is meaningful to me because I try to help people figure out how to change deeply ingrained patterns. We now know that 90 per cent or more of the major illnesses that cause suffering are more about lifestyle and choices rather than genetics as commonly understood. We now know that our choices even turn genes on and off. So much of our health care is not about the medication. It's more about changing our lifestyles and waking up to our value and purpose. But the default mode network makes that challenging for us.

For example, if I'm talking to somebody who struggles with alcohol, I might ask, 'What would it take to really close that door in the back of your mind that you keep cracked?' You can tell some people genuinely want to change a habit or lifestyle. But you can also tell that many times they're keeping a little

door cracked in the back of their mind. If it gets stressful, they can go back through that door. One more drink. Just for one night.

But then it never is one night. It just opens up that whole door again. The same is true for the lifestyle issues associated with most of our major illnesses, whether that be heart disease, diabetes, obesity, cancer or autoimmune illness. The analogy of burning our boats helps us make that change. That's why the analogy is important.

If you close that door for ever, if you burn your boats, you can tell. As a doctor, you can tell when someone burns that boat. You feel it. You can tell that they have closed a door and thrown away the key. They're not going to go back through that door even if it kills them because they don't want those consequences in their life any longer, whether it's the diabetes or the alcohol or the heart disease or what it's doing to their wife or their children. You can feel the shift. Sometimes the shift is so strong that the person feels disgusted by the old pathway, the old DMN.

5D

You write that if people fully immerse themselves in healing patterns, great things can potentially happen. You write that scientific studies are often built around the mean, around what the average person does, and that

we don't study the outliers because we don't notice them.

JR

Yes. If I was ill, I would want to know what the average person does, but I would also want to know what the ultimate achievers in health do. They do things very differently. Tom Brady and Serena Williams are the ultimate achievers in sports, and Steve Jobs was an ultimate achiever in business. We study them. Studying them doesn't mean we all are going to be them. But we can learn a lot from them. In the same way, I believe we should be studying the ultimate achievers in health. Many more of them exist than we realize.

What these people do is they drop themselves into a very different default mode network, either quickly or over time. Stepping into a new world takes faith. It's kind of like when Indiana Jones steps off the cliff and the path appears under him. He couldn't see it. He had to take a step of faith. We can't see what the next step is immediately. Our default mode network doesn't let us see it.

Sometimes we have to take a step of faith into a whole different world, trusting that the universe is fundamentally benevolent and for us, and hope it is the right step for us. We have to think that, well, this is the right thing to do. I just don't see a way forward. A new default

mode network then develops over time that is healthier for us.

5D

So Spielberg was right? Don't go in the water. Stay away from the sharks. Take a leap of faith.

JR

Exactly.

5D

Has this seventeen-year process changed your views of your own spirituality?

JR

I grew up in a very violent environment. This has been a personal journey for me. I had a lot of questions, a lot of confusion. This has given me a path to ask those questions. And that's why I've become very keen on building models in our institutions that are about what's right with people, seeing what's possible, rather than building on what's wrong.

If you want to help an alcoholic or a person with diabetes or heart disease, you don't help them so much by focusing just on the disease. You help them more by showing them the kind of life that is possible, that they're not this disease, that they're not this alcohol, that they're not this 359 blood sugar, you know. That they have worth and value.

## Q&A

And then you help them focus on something that fills their heart and their soul at a deeper level with something positive and life-giving. That's very different. It goes a lot further. And my personal journey around that has very much matched what's helped me put together a whole different life than you would have expected, based on where I started.

5D

In the book you focus on root cause. Do you think COVID-19 will force people to think more about root cause?

JR

I hope so. I'm trying to understand the best way to respond to this too. Right now it doesn't seem like there's much being written or discussed about how to build a flourishing immune system. And ultimately that's the best way through this. I very much want to help people develop strong immune systems that can take on all comers.

I purposely told the story in *Cured* about the lifelong debate between Louis Pasteur, the father of the germ theory, and Claude Bernard. Our approach in Western medicine is almost exclusively reliant on a particular appropriation of germ theory and its unexamined assumptions. It's very powerful and is right in many ways. But there's more

to the story. ‘Nuke the germ’ is not the wisest or most powerful approach, and in fact has all kinds of dangerous downsides.

We’re all surrounded by millions of pathogens every day. These viruses, bacteria and fungi only become invaders when something is broken down in our system. They’re a symptom of the problem, not the cause of the problem. When we wipe out our microbiomes through poor nutrition, overuse of medications, or poor stress management, for example, we wipe out the hard drives of our immune systems.

I love the story of Claude Bernard saying, ‘No, you’ve got to take care of your microbiome.’ He didn’t use that word, but that’s what he meant. And if you take care of your microbiome, then all of the millions of unhealthy bacteria and viruses won’t overgrow or have a place to live. Is it better to keep waving flies away from rotting food, or is it better to remove the rotting food? Taking care of your microbiome instead of nuking the virus or bacteria is the same issue.

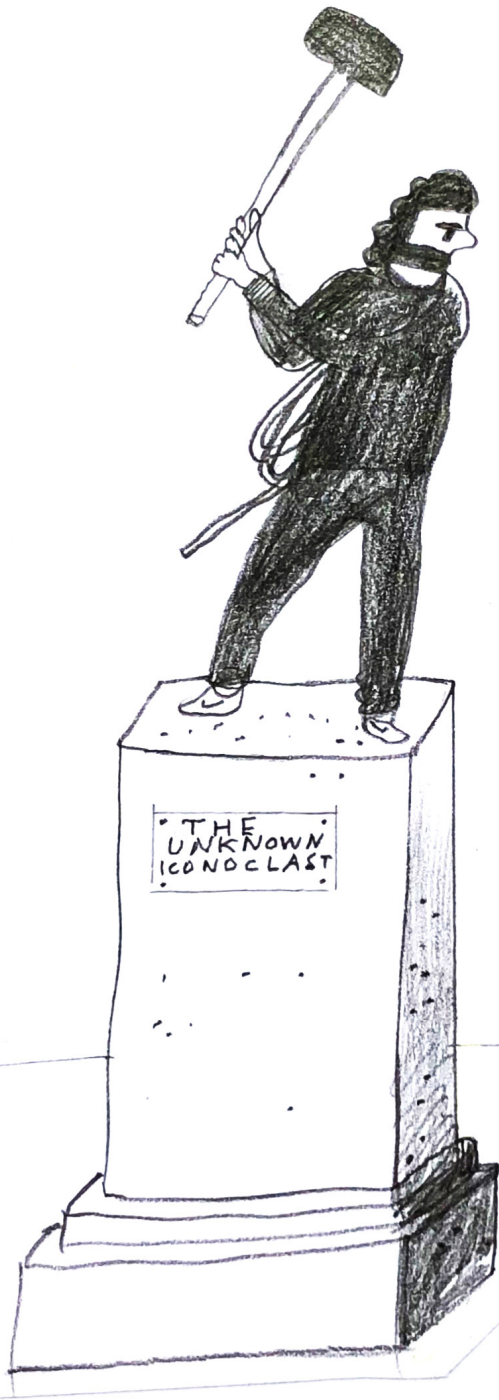
The story goes that Claude Bernard drank a glass of cholera in front of his students and said, ‘The germ is nothing, the terrain is everything.’ Now you can’t just do this without understanding what is really entailed in creating a healthy immune system. But this is where we need an entirely different

## Q&A

paradigm, so that we are strengthening immune systems, and studying how to do so, instead of weakening them as we currently are. I'm hoping that we can get a discussion going along those lines, but it's not there yet.

Personally, you know, I'm not worried about getting COVID. I'm in rooms with COVID patients every day for hours. I'm around this stuff a lot, but I think these stories have so deeply influenced the way I live my life, I'm able to work long days, do a lot of things, and be exposed to things and not worry. I'm a human being. I could get ill, absolutely. I could get stressed out and make mistakes and something could happen. But I do believe I've built a strong foundation and I want to help other people do the same. ◇





0/20

What Do I Need  
To Know  
Before Opening  
My Copy of  
Deborah Levy's  
*The Man Who Knew  
Everything?*

*The Five Dials*  
no-nonsense guide

*How does one get to know Deborah Levy?*

‘Deborah Levy is a risk-taker—in both her life and work. Her recent memoir, *The Cost of Living*, offered a gutsy take on finding her footing and voice in a world in which women are often relegated to supporting roles.’

—Heller McAlpin, *NPR*

‘In Deborah Levy’s short story “Cave Girl,” a woman decides to pursue what she refers to as a sex change from female to female... The surgery is a success; she emerges with a “cool and easygoing voice” and a newly accommodating nature. “The surgeon did well,” she tells her brother, pleased. “He really fiddled with my controls.” There might be no better description of reading Levy, who loves to yank at our wiring, our orienting premises and prejudices.’

—Parul Sehgal, *New York Times*

*What are her books like?*

‘In one short and sly book after another, she writes about characters navigating swerves of history and sexuality, and the social and personal rootlessness that accompanies both. If the themes sound weighty, Levy’s elliptical fiction is the opposite, thanks in part to her wry appreciation of dramatic ironies at work... Levy doesn’t whisper in her fiction, but in her slim, elliptical books, she unspools big odysseys.’

—Rachel Donadio, *The Atlantic*

## TWO-MINUTE BOOK CLUB

‘Reading Deborah Levy’s novels is a lesson in humility. She is a careful and intelligent writer with an absolute command of language, one who demands you not only to pay close attention, but also second-guess your immediate reactions and responses to her work. Her novels are deceptively slim in length, but supersized...’

—Connie Ogle, *Newsday*

‘Levy has described the “appeal of writing” as “an invitation to climb in between the apparent reality of things, to see not only the tree but the insects that live in its infrastructure, to discover that everything is connected in the ecology of language and living.”’

—Lidija Haas, *LRB*

*But if you had to pick a food?*

‘Levy, a two-time finalist for the Man Booker Prize for her novels *Hot Milk* and *Swimming Home*, writes slim books that, per ounce, pack a surprising caloric density—like pine nuts.’

—Heller McAlpin, *NPR*

*And her characters?*

‘The characters who inhabit Levy’s books tend to be displaced persons: people who are wearing the wrong clothes for the climate of the country in which they have landed, people who say the wrong

## Five Dials

things. Eventually, their sense of dislocation can short-circuit them.’

—Fernanda Eberstadt, *New York Times*

*What do you learn about this book from the headlines of the book reviews?*

‘Crossing Abbey Road: It’s More Dangerous Than You Might Think’

—*New York Times*

*What does the book’s editor like about the novel?*

‘The brilliance with which Deborah uses fiction to explore simultaneity of experience across timescales—the past in the present and the future in the past.’

*What did the rest of the editorial team enjoy?*

‘It’s a nuanced take on the old question of intent versus responsibility. Plus Deborah’s completely inimitable and always mesmerising patterning of image and symbol.’

*How does the novel relate to photography?*

‘Themes of objectification, betrayal, and focus come into play throughout Levy’s book, beginning with one of its epigraphs, from Susan Sontag’s *On Photography*: “To photograph people is to violate

## TWO-MINUTE BOOK CLUB

them, by seeing them as they never see themselves, by having knowledge of them they can never have; it turns people into objects that can be symbolically possessed.” Literature, of course, can do the same.

—Heller McAlpin, *NPR*

*What about it you had to really describe the novel's structure?*

‘*The Man Who Saw Everything* is a brilliantly constructed jigsaw puzzle of meaning...’

—Wendy Smith, *Washington Post*

‘Deborah Levy’s novels are small masterworks of inlay, meticulously constructed.’

—Anna Munday, *Wall Street Journal*

‘Her novels are meticulously structured. They circle in on themselves, full of repetitions, allusions, and elisions whose logic unfailingly reveals itself at the end.’

—Ruth Margalit, *NYRB*

‘The book is constructed like a cat’s cradle, a chronological double helix.’

—Fernanda Eberstadt, *New York Times*

‘Fitting together exactly what you’ve seen isn’t always easy in this greased Rubik’s cube of a book.’

—Holly Williams, *The Independent*

## Five Dials

*And one more?*

‘Levy, as evidenced in *Hot Milk* (2016) and *Swimming Home* (2011), is a master of the seemingly loose yet actually taut story...’

—Anthony Domestico, *Boston Globe*

*Could you succinctly summarize this novel?*

‘There is no way to succinctly summarize this slim book and adequately convey how it manages to hold exquisitely actual multiverses within its pages...’

—Kristin Iverson, *Nylon*

*How about a plot summary?*

‘It’s best to read this book cold, not primed by reviews that provide too much information about the plot...’

—A reader on GoodReads

*Perhaps just a hint of how it starts?*

‘In 1988, aged 28, Saul is hit by a car on the famous Abbey Road zebra crossing in London. Or is he? In the immediate aftermath of the accident Saul, a student of eastern European communist history, breaks up with his photographer girlfriend, Jennifer, moves to East Berlin, falls in love with his host, Walter, who is a Stasi informer, sleeps with Walter’s sister and ends up possibly betraying them both,

## TWO-MINUTE BOOK CLUB

accidentally, to the authorities.’  
—Stephanie Merritt, *Observer*

*What if I could sit in on a discussion about the novel between a few booksellers?*

Claire: [Levy’s] doing this brilliant stuff that is kind of hiding in plain sight—I don’t know if that’s usually used as a compliment or not, but I mean it as one in this case. She doesn’t waste words—she gets right to exactly what she means or wants you to know, at the right moments, without having to overuse stuff—it’s perfect.

Rachael: But she also does it in a way that doesn’t feel withholding, that feels very natural to the flow of the book. Sometimes you read books that are doing that for effect, and it’s really deliberate, and you feel: just get on with it.

Katy: Or loads of backstory—‘and then when Jennifer was a child...’. Because it’s written in an ambiguous way, I was desperately reading it—it was a really thirsty read. But not like *The Hunger Games* is a thirsty read: that was so bingeey, really great fast food; this is—I don’t know what it is, but I still wanted to eat it really quickly.

—Bookseller’s Roundtable,  
London Review Bookshop



## Five Dials

*What does Deborah have to say about her own novel?*

‘Obviously, I am a reader and a writer, so I had my eye on the story and I did not want the narrative to collapse. It is much more interesting and challenging (and frankly requires more skill) to keep it together. It was so exciting to find new techniques to structure this story. In my view, a literary technique should be more or less invisible—what’s the point of a technique walking its heavy boots all over the page? So, I like to construct a light surface in which seemingly random incidents occur, but the ecology of any sophisticated structure is that everything is entangled with everything else.’

—From her *Longreads* interview

*What are the chances you’ll end up reading this novel again?*

‘If I were to create a list of books that require (not just deserve) a second reading, I think I would put this one at the top.’

—Neil, a reader

FEATURED ARTIST

Jaiquan Fayson



# ‘My Hands Never Shake’

The winners of *Five  
Dials*’ latest fiction-  
writing contest

*Last month we put out an open call for the latest in our series of Very Specific Commissions. As usual, we asked readers to produce a piece of short fiction based on a current event, this time the spread of COVID-19. We were stunned by the response. Submissions came in from professional writers, first-timers, part-timers, and even a couple of actual doctors. We received 400-word short stories from all over the world. Here is the specific commission we posted:*

The narrator is an infectious disease expert at a hospital in London. Describe what happens when she finally gets home from work. What are her new rituals? How does she relate to her family?

The story must include a scene in which the narrator interacts with someone delivering food to her flat.

The story must contain the line of dialogue: ‘My hands never shake.’

*Please enjoy excerpts from the notable entries. Read to the end to view the winning entry.*

## VERY SPECIFIC COMMISSIONS

*In many of the submitted short stories, the narrators can't believe or understand the irresponsible behaviour around them, both inside and outside the hospital.*

*'In the parking lot,' writes Norris Eppes in his entry, 'two young men (not wearing face masks!) bloviate about the asterisk on Liverpool's season.'*



*Life is not easy for many versions of the protagonist.*

*'Texting my mother on toilet breaks,' is how Peter Scalpello describes his doctor's life. 'Staffroom full of buzz cuts and acquired germophobia, a collective muffled voice. Scratching itches with elbows, everything with elbows.'*



*Work is as stressful as you might imagine.*

*'Every day, I am counting,' Susanna Crossman writes.*

*'Suspected cases. Mild. Severe. Deaths. Tallies. Dashboards. Certificates to sign. An Exponential Disease. The Wonderful Law of Logarithms. The Pandemic Respiratory Infection Emerging System Triage. PRIEST.'*

*Crossman's excellent story continues:*

*'I am sweaty. Need to get in the shed. Undressed. Seal my clothes in a knotted plastic bag. Shower. Disinfect. Lie inside a dreamless bed where it feels like the mask is still on my face, as though it is drawing a pressured line.'*



## Five Dials

*Some of the doctor characters admit they are up against a formidable foe.* have fallen asleep in front of the TV again.'



'Infectious diseases all have their own set of sequenced behaviours,' *Jan Ruppe-Rahman's doctor says*, 'but they also follow a pattern, and spotting that pattern and preparing traps for viruses is my vocation.'



*Some are dealing with complex family situations.*

'It was after 3 a.m.,' *writes Tom Ashman in his entry*.

'I removed my coat as quietly as possible then headed towards the bathroom to scrub my hands for the millionth time and change into pyjamas that I'd laid out earlier. There was a crack of light around the front room door. Mum must

*A few of the doctors try home-made remedies.*

'The fridge is my favourite part of my kitchen,' *writes Brian Ng*. 'It has an ice dispenser. Plop, plop, plop. I add gin, vermouth and more than a third part of Campari. I swirl the glass around—because fuck utensils—and take a sip, when the buzzer sounds.'



*Eventually, in each of the stories, the delivery person arrives with the food. In his entry, Tim Stokes offers readers an unlikely poetic image.*

'Beneath me are grey shopping bags,' *he writes*,

## VERY SPECIFIC COMMISSIONS

‘their handles raised upwards just like my daughter does with her arms when she wants to be picked up. I move them one by one into the hall and close the door before shuttling them upstairs in packs and depositing them on the kitchen floor.’



*Again and again, authors remind us of the importance of human connection, however compromised.*

‘On the other side of the entrance, someone in a motorcycle helmet stood with their gloves pressed to the glass,’ writes Lauren Alonso Miller. ‘I smiled and piled the containers in my arms and climbed the stairs back to our flat, the food burning into my chest.’



*Writer Tomoé Hill finds classical overtones in the arrival of the delivery rider.*

‘I count under my breath, 10-9-8-7-6-5-4-3-2-1. Opening the door, I see the black-clad rider by his bike, face obscured by the dark helmet but hand held up in acknowledgement. For a moment I am frozen: Eurydice seen, to be returned to the underworld and its cacophony of sadness by the unknown guide.

And then he is gone.

Picking up the warm paper bag, I look down at my shaking hand.’



*With the delivery person waiting at the door, one of*



## Five Dials

*the doctors questions her own behaviour.*

‘What if I’m infected already and asymptomatic?’ asks *Christine Fischer Guy’s* protagonist. ‘I’d be wearing a mask now if we had enough to go round. I should be wearing one. This poor kid might be exchanging soup for an infection no one knows how to cure. He’s in the hall now, knocking. The latest data says the young ones recover. When did I last eat?’



*Emma Fenton’s* delivery person isn’t a stranger, or as much of a stranger.

‘There’s a knock,’ *she* writes. ‘Something pulls me outside of myself. I gingerly clamber up and out past the messes to

the front door, swinging it open. There stands my next-door neighbour. The one I never talk to, but like, sharing smiling nods in the stairwell. She heard me come in and she had just made some food. She thought I might be hungry. She offers a delicious warm-smelling plastic container, sides red and steamy with tomato sauce. I look at her, I don’t know what to do. From my mouth, the words escape: “My hands never shake.”’



*Timing is everything for these doctors. For Jennifer Taylor’s* protagonist, the knock on the door comes too soon.

“‘I’ll get it,” I said.

Outside was a young man holding our food, a smiley face on

## VERY SPECIFIC COMMISSIONS

the bag. With wide eyes, he extended his arm to hand it over. “Pardon me, ma’am.” His head cowered.

I was so knackered that I had forgotten I was naked.’



*The act of receiving food is just as traumatic for some of the doctors as work inside the hospital.*

‘I crumple against the back of the door,’ *writes Rachel Belward*. ‘My chest shudders. I stare down at the box blankly. The tears are arriving in earnest now. A wet, exigent crowd in my throat.

“Mummy? Your hands are shaking.”

I swallow. Push a smile across my cheeks. I’m trying, but it can’t quite reach my eyes.

“My hands never shake.”

I thread my trembling fingers together, meeting my son’s gaze. My voice sounds hollow even to me.’



*A few entries, including that of Elizabeth Chakrabarty, depict political awakenings.*

‘In the bathroom I wash my hands, singing “The Red Flag”’—despite my public school and Oxbridge background,’ *writes Chakrabarty*.

‘Like most experts in infectious diseases now I know socialism is the only way: to combat the pandemic, medical, economic and social injustice.’

*In Chakrabarty’s story, the delivery comes from a local*

## Five Dials

*Indian restaurant.*

“Southbank Tandoori delivery.”

Going by the accent—not unlike my own—another foreign body,’ *she writes*. ‘We’re all foreign bodies: health, food-delivery, shops and transport—brown bodies run Britain, while Westminster and Windsor play-act Empire and Monarchy.’



*For those with such regimented lives, the appearance of the delivery person is often a chaotic moment.*

‘I recoil,’ *writes S. J. Kim*. “No, no hands. My hands,” I say, “never shake.” I say very slowly, “Social distancing.”

There’s a flicker of understanding in the

Chinese man’s dark eyes. I smile.

“I’m sorry,” the Chinese man says. “I saw you on the news.”

He places my food on the ground and takes two, three steps back.

“I only wanted to thank you for your hard work. I wasn’t thinking. I’m sorry.”

“It’s fine,” I say, grabbing my food and slamming my door without meaning to.

I press my ear to the door.

I hear him shuffling.

“Sorry again,” he calls out.’



*Jessica Powell’s protagonist is a young doctor who fantasizes about escape with a whole array of people. Her range is impressive.*

‘Sometimes it’s

## VERY SPECIFIC COMMISSIONS

my husband,' *she writes*,  
'other times it's the  
gardener. Tonight, it's the  
girl who delivered my  
curry.'

*Where does she go? Where  
do her thoughts take her?*

'Now I think about  
Hawaii, a ridiculously  
long trip from London.  
The Americans are loud  
and the teenagers are all  
taking selfies; children  
invent games along  
the shore. Next to me  
is the delivery girl in  
her tracksuit. We sit in  
lounge chairs chewing  
bubble gum, the sun's  
warmth wrapping our  
bodies like a blanket. Her  
music is still horrible. So  
many upbeat tragedies,  
wishing things were like  
they used to be.'



*Romance is absent from our*

*third-place entry by C. D.  
Rose. In this COVID-19  
world, there is little time for  
anything but regimentation.*

'I am an infectious  
disease expert at a large  
hospital in London and  
my hands never shake.  
Each day I cycle forty  
minutes to work where  
I treat patients, consult  
with colleagues and  
look at screens for up to  
sixteen hours, and then  
I return home. When I  
get home I remove my  
clothes, place them in  
the washing machine,  
then step into the shower  
where I stay for sixteen  
minutes. I eat sparingly.  
My life is regimented,  
precise. My hands never  
shake.'



*In the entry that claimed  
second prize, Neil Arun  
depicts his protagonist's*

## Five Dials

*complex home life, and even finds time to tell a medical love story. Here he sets the scene:*

‘I work in the same ugly building as before, down beaten corridors, in rooms that resemble scenes from a space station, a world unfit for humans. As for the other world—it seems to be holding up well without us. Cycling home, I catch the scent of blossom along what used to be London’s second-busiest road.

We live in a block of flats, the man that I married and the little people that we made together. We don’t have a porch and so, after locking my bike, I climb into the car we barely use and change once more, out of my work clothes and into something comfier, less

contaminated. I text my husband to say I’m running late, and order a Chinese meal on the phone.

I met him at a medics’ Halloween party—vodka jelly and complex injuries. I thought he was done up as a zombie but he was just tired, having come off night shift.’

*Sparks flew.*

‘The next day, pulling on his sambuca-infused shirt, he asked me what I look for in a good virus. “Something that makes you sneeze,” I said. “Something that makes you question who you are.”’



## VERY SPECIFIC COMMISSIONS

*The winning entry for this issue's Very Specific Commission came from Joshua Craze, a writer based in South Sudan. When he's not entering our contests, he keeps busy writing about, in his own words, 'COVID-19, South Sudan, and catastrophes, loud and quiet.' You can find his recent travelogue here: <https://nplusonemag.com/online-only/online-only/quiet-catastrophes/>*

### WINNER

## My Hands Never Shake Joshua Craze

Work is alveoli, membranes and flesh. It's best not to remember work. I'm grateful for those minutes on the Tube, standing awkwardly in a hazmat suit. Minds need cleansing, too. At the apartment, we built a small decontamination room where the hat-stand used to be. I strip naked and scratch my skin with dry soap, as if I were at some new-fangled spa, ready to endure medieval tortures in the name of beauty. Then I put on a tracksuit and go through the second door. I'm home.

That's my life. At work, there is only flesh and its images. At home, there is only family. Life is slimmed down to two poles.

When I come home, we replay the drama of the hospital. Mark, my youngest, takes my temperature, while James, already serious about his

## Five Dials

work, clamps the oximeter on my finger to read the oxygen levels in my blood. My husband has already taken the children's readings and, as a family, we collectively enter our results into my phone. We are fine. Just fine.

James looks at me. Why are your hands shaking, Mommy? I tell them, my hands never shake. I am fine. Just fine.

Now it is time to order dinner. We no longer cook. It's a public duty to get delivery. This is war, and our only weapon is consumption. Tonight, we order Sichuan. A year ago, I would have eagerly waited to pay with a card. One gloved hand passing plastic to another gloved hand. Cards were abolished a month ago; money, dirty, smelly money, was abandoned soon after the beginning of the crisis. We are all contactless now. The courier's arrival is announced by the thud of my order on the doorstep. For the courier, I am just an address and a predilection for Mapo tofu and pea shoots with garlic.

We eat together and I gather the remains for incineration. The children go to bed; my husband goes to his screen. That's the most intimate part of him these days. I clean away and get into the shower. My hands run over my body; I remember the flesh I have seen and the faces struggling to breathe behind glass barriers. That's when I start preparing for work: Klonopin, Zoloft, Halcion.

I'm on life support; they are on life support. We are all on life support now. ◇

Wish You  
Were Here

VILLAGE BOOKS  
Carlton Avenue,  
Dulwich London



*This series celebrates indie booksellers across the UK. In the first instalment, we travel to Dulwich. Even if you're not able to step into Village Books, there's nothing stopping you from imagining what it's like to be there. It's important to celebrate the rooms where bookselling happens and the people who enact the ritual each day. We hope our readers maintain a connection to their local indie. It'll soon be time to break out the dog biscuits again.*

*Hazel Broadfoot welcomes you to her shop:*

My bookshop is tiny, seven hundred square feet on two floors. I don't think it's changed much since it opened nearly a hundred years ago. Back then it was the Gallery Bookshop and Lending Library. We still have the same door and windows, despite them being blown out during the war.

We have a beautiful old parquet floor. We're stuffed full of books. There are always fresh flowers on our new books table. We're expecting pink peonies in June. We're a dog-friendly shop with a stash of biscuits just off the shop floor. My spaniel prefers the Markies.

The bookshop was the setting for a children's book by a Scottish writer, Jane Shaw, who was a favourite of mine when I was growing up. She lived in Dulwich. A lot of her books are set here, though she called it Wichwood Village. Back in 1996, when I bought the bookshop, I discovered it was the shop I'd read about as a child.

It's often filled with the smell of new books. At

## WISH YOU WERE HERE

the start of this lockdown, the shop was completely closed for about ten days. We had no books coming in. The new books started arriving when I was able to return to the shop. That's when it began to smell like normal. Unpacking boxes of books is like Christmas. You never know which treats will emerge.

We hear all sorts of different sounds. Cars hoot from the busy nearby junction. We're on a school route, so we hear children on the walk to and from school. We hear their joy when a new book by a favourite author appears in our window. We hear birds sometimes. A customer recently recorded a dunnock singing from our rooftop. I was dead impressed she recognized its call.

So many favourite books sit on our shelves: Elizabeth Jane Howard's *Cazalet Chronicles*; *Old Filth* by Jane Gardam; *Standard Deviation* by Katherine Heiny; *On Turpentine Lane* by Elinor Lipman; *A Suitable Boy*; *Italian Neighbours* by Tim Parks; *Kolymsky Heights*; *The Skylarks' War* by Hilary McKay; all of Elly Griffiths's crime novels; Susie Steiner's crime novels.

Occasionally I become a bit of a magician in the shop. Someone will come in with vague details or a half-remembered title and I'll pluck the book from the shelf and present it to them. I like old-fashioned bookselling. I'm always happy to beat the computer, though I do remember what bookselling was like without computers—and I never want to go back.

## Hazel Broadfoot

We're small, so the whole shop often joins in when customers start a conversation about books. ◇



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