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NON-FICTION | SPRING 2016

## Finding the Words

By Kerry Malawista

“I’ve never seen a therapist before,” began my new patient. “But my internist recommended I see you. Ever since he told me that I have Parkinson’s disease, I have not been myself. I can’t sleep. I walk around in a fog. I can’t get my mind to make sense of it. I can’t believe it’s true. It’s like I know it, but I don’t.” I, too, found it hard to imagine that this vibrant, elegant woman sitting before me was seriously ill.

She described in detail the course of events that led to her diagnosis—the endless doctor visits, the blood tests, the MRI’s, the uncertainty and worry. But she had no words or thought about what it meant for her future.

Instead she told me about a rich and rewarding life: a predominately happy fifty-five-year-long marriage. Her many years as a teacher. The pleasure she found in her adult son and daughter. Her weekly bridge games, morning swims at the YMCA, and the hours she spent with her five grandchildren. Her face lit up as she told me about Ashley’s winning soccer goal and Robbie’s skill on the computer.

Our sessions continued with Margaret repeating that she couldn’t believe she had Parkinson’s disease, and wondering whether perhaps it was all a terrible mistake. Yet I could see the truth of the diagnosis in her mask-like face, her slow movements, and the slight tremor in her hands. Our meetings began to feel deadened, repetitive. I wondered whether her boggy thinking was another symptom of her illness.

In our fifth or sixth session, Margaret told me a story of the time she took her children to an amusement park. She listed the rides they went on and mentioned off-handedly that “the boys” loved the bumper cars. “The boys” was said so casually that I almost overlooked it, and I wondered if her son had brought a friend along on the outing. But there was something about the way she moved her body, as if ducking a physical blow, that alerted me, and I asked “the boys”?

She looked startled.

“Oh, I guess I haven’t said...I never talk about it. I have...had...three children.” She paused, her head cocked to the side as if looking at something in the distance.

“It’s been almost forty years, and I still don’t know how to talk about it or even how to answer when I’m asked about my children.” Tears filled her eyes.

“I’ve told you about Alicia and Adam, but not about Matt—my youngest. He died... leukemia. He had just turned eleven.” With those last words her face crumpled in on itself.

The change in her face and in her body was so remarkable that it seemed as if time recalibrated, and now I was sitting with a thirty-nine-year-old mother who had just lost her son. Witnessing her inconsolable sorrow, I felt a sickening jolt as if I had been stabbed in the chest. Tears came to my eyes.

I knew this unbearable pain. I, too, had lost a child. I, too, had struggled with how to survive the unimaginable grief. How to accept the forever of this death? As with a phantom

limb, the brain refuses to accept the loss of part of the self; for a mother, a child is just that, an essential part of the self.

While in that moment I longed to tell Margaret of my own loss, to sit together, two mothers who had lost a child. But I knew that this was not what she needed. I had found the words for my grief. I needed to help Margaret find her own.

Once Matt's death was there between us, treatment opened up. We came to understand how Margaret's Parkinson's diagnosis had brought her back to those moments of horror when she first heard those words, "Your son has leukemia." And then, "Your son is dead."

The narrative of losing Mathew had been frozen into a silent, aching space: an immovable space with no time—no past, no future, no words. Without a language for her grief she was blocked from mourning or remembering her son.

Over the weeks and months that followed, Margaret talked and talked, not about her own illness, but about Matt. At first hesitantly, in a whisper, about his pain and what he suffered, and her agony at watching him suffer. She talked more audibly about raging at the doctors who could not save him, at herself for not saving him, about the ache that never goes away. I understood that in a strange way she didn't want the pain to go away, because it tied her to Matt. Like a secret pebble she carried in her pocket, she could turn it over and over.

Slowly, after sessions filled with unabating grief, Margaret began to remember the healthy Matt. The baby she held in her arms; the toddler who loved Cheerios. She recalled his love of motion—bicycle riding, roller coasters. The way he rubbed noses with her at bedtime. His laughter. She brought in pictures of Matt, so I too could appreciate his wonder.

It was then that I realized that without directly telling Margaret about my own child's death, I *had* shared my experience with Margaret. The depth of my loss could hold the depth of her loss, my path to talking about my daughter could inform her path.

Over the two years that we worked together, I watched Margaret's physical symptoms worsen, yet she told me that she was grateful for her illness. Facing her own mortality had made it possible for her to grieve and reclaim cherished memories of her son. Accepting Matt's death and her own, she was able to bring him back to life.

*Permission given by patient's family. Details have been altered to protect patient privacy.*

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