

Arnon Grunberg: Happiness Is the Possibility of an Escape

He spent the year 2017 working in various slaughterhouses, he worked as a cleaner in a Bavarian hotel, visited the troops in Afghanistan and Iraq... Arnon Grunberg had himself „imprisoned“ several times in order to examine specific environments. In 2018 he spent some time in Zuiderlicht life-care center in Belgium. He reflects this experience in the following article that he read at the 29th Prague Writers' Festival.



The cab driver who brings me from Sint Pieters station in Ghent to life-care center Zuiderlicht in Mariakerke says, once we've arrived at our destination: "Oh yeah, I brought someone here last year." The newly-built nursing home is bordered by forest, with almost no houses, no people either for the moment.

The driver looks at me questioningly as he lifts my suitcase from the trunk, as though he can't quite believe that this is where I'm supposed to be. I've ended up in the middle of nowhere, which is probably symbolic: decline must not take place at the center. Muffling away the preliminary stages of death, the dissolution, keeps us calm.

Having in the past gone "embedded" at, among other places, a hotel, several slaughterhouses and a

psychiatric hospital, a nursing home seemed the logical next step. Man begins his life as a creature in need of intensive care, and that life usually ends in the same way. In between one has the restaurants and cafes, the therapeutic divans and the jobs, the latter of which do not necessarily entail killing in a slaughterhouse. The difference is that parents are deemed to provide care for their children, while the care of adults is usually farmed out to professionals. The aristocracy, after all, once left the care and raising of its children to servants. Whenever care-givers begin speaking of quality of life, the end is in sight. And, in the way a restaurant reviewer analyzes restaurants, I am out to thoroughly analyze the final phase of care, to evaluate both the quality of life and the care, to the extent that they can be distinguished one from the other.

And so, on my website, I announced that I was looking for a nursing home. Two homes responded, both of them in Ghent.

Steve from Zuiderlicht called me in early July, he said: "We'd be pleased to have you. We're an open house. We have nothing to hide."

On August 20, 2018, I walk in on the Monday morning staff meeting at Zuiderlicht. Steve turns out to be a jovial fellow, wearing not only a striking armband but also a fashionable short-sleeved shirt. The staff is talking about planters. Steve says: "A thousand euros for some stupid planter that isn't even environmentally sound, forget it. I think that's too fucking expensive."

Planters are important, particularly at a nursing home. Death and decay may be knocking at the door, but life remains welcome, even in the form of plant life. I will be staying here for two weeks; the first week has now begun.

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Zuiderlicht currently has just under fifty residents. On the first day I made the mistake of referring to them as "patients". I won't do that again soon.

Steve says: "Here we talk about 'residents'."

The home has three departments. One for early dementia, referred to as "Luna" to avoid stigmatization. The second is for those with a mental disability, and is referred to as "Oase" for the same reason. And finally there is "Orion", reserved for those with a psychological vulnerability. Psychological vulnerability can be anything from anxiety attacks to borderline syndrome.

I have been assigned a room in the new, as-yet-unoccupied wing. On the same level, the ground floor, is Luna. I eat dinner with the early demented.

Not all of the Luna residents are easy to communicate with. There is one gentleman in a neat checkered shirt who holds his right hand in his left as though it were the Bible; otherwise he remains completely

rigid. He doesn't speak a word, hasn't for a long time apparently, although I have heard him sneeze.

One floor up, at Oase, you have Vicky. She wears a floral dress and black spectacles, a pair of headphones around her neck. She says: "I've been sick, but it's starting to get better. My daughter is staying with my sister now."

I ask how old her daughter is. She doesn't know. Someone else says: "She's ten." Then with an almost triumphant smile, Vicky announces: "She was here only yesterday, she kissed me three or four times."

No one at Zuiderlicht receives treatment. Discharge is not an option, Zuiderlicht is the end of the line. It is all about, as Steve put it, "stabilization and giving meaning to lives".

This is also where Engin lives. He's 38, has a hard time speaking, sometimes he communicates by using a plasticized sheet of paper with the alphabet on it. He is allowed one cigarette an hour, that's what he lives for. He used to be a cab driver. He also drools with the kind of gusto that gives me the feeling that, for him, drooling is a form of protest; his self-esteem is in that drool.

Another Oase resident is Rita. She doesn't actually have a mental disability but, pending the opening of the new ward, she lives temporarily among the residents who do. What she has is an advanced form of multiple sclerosis, she sags in her wheelchair like a big, human sausage. But her eyes: rarely have I seen such lively, gentle eyes.

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Vanjuschka, 49, asks me to help with her makeup. Her makeup is in a plastic container that could just as easily serve to hold grated carrots. She once studied Germanic languages. Vanjuschka wears a beige skirt and a sweater that looks like a Missoni: bright colors, stripes. Her hair is mussed, she wears glasses.

"I'm not very good at makeup," I tell her. "Where am I supposed to start?"

"With the rouge."

She was married to an Iranian by the name of Ahmed, she says she still is. They met while she was teaching Dutch as a second language.

Vanjuschka speaks only with difficulty.

After the rouge comes the foundation. "How am I supposed to put this on?" I ask.

“With your finger,” she says.

There are spots of her skin that the foundation only emphasizes.

Her parents show up around lunchtime. They take a seat in the cafeteria. Her father is in his eighties, he used to teach school in Deinze, her mother is 73. The father has a beard, the mother wears a sleeveless denim jacket.

“It started in 2015, with a bad depression,” the mother tells me. “She came back home to live with us. The psychiatrist who was treating her said: ‘She won’t talk anymore.’ Then she went to a speech therapist. Her husband abused her, he didn’t do anything, only wash his own clothes.”

“No,” Vanjuschka says.

“All her resistance was gone, because of the stress.”

Vanjuschka eats her hot lunch in highly original order. First a bit of fish and potatoes, then her dessert, chocolate mousse, then she goes back and finishes the fish.

“It’s one o’clock,” Vanjuschka says, “could I have my Cola Light?”

“Impulsive behavior is one of the symptoms,” the mother, Anita, tells me. “If we didn’t stop her, she’d smoke herself to death.”

“We didn’t know whether to name her Vanjuschka or Johanna, but we read a lot of Russian literature, so we decided on Vanjuschka.”

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In the ward for early dementia lives a lady in her sixties who doesn’t want her name in the paper, because she “once held a position of responsibility”. She takes her meals alone in her room, and passes through the shared lounge at most only on her way outside for a smoke. The lady, who dresses extremely well, dines alone because some of the other residents eat in a fashion or are spoon-fed in a way that destroys her appetite. She started smoking when she was ten, she has one daughter, who she describes as a “bonne vivante”. Sometimes she leaves the center for a “little beer”.

She had herself committed, preventively. "They told me: 'If you wait too long there won't be any room left, then you'll end up in a closed ward.'" She's no longer able to write, or do arithmetic either, "even though I was once quite good at that". Her story sounds coherent. She hopes a resident will come along who is in as good a shape as she is, so she has someone to talk to. Sometimes she regrets having come to Zuiderlicht so soon, "but well," she says, "there's no going back. I have no furniture, no bed, the bridges have been burnt behind me. My daughter says: 'come live with me and my boyfriend,' but I wouldn't do that to her, she's in her twenties, she has a whole life ahead of her, I don't want to burden her as well."

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For many of the residents, and perhaps a few caregivers too, quality of life and the provision of meaning are embodied by the cigarette. The cigarette, I would say, is the Messiah.

There we have Engin, who avoided me at first, but who shakes my hand whenever I see him now. Small, withdrawn, but cheeky at the same time. Always a little grubby, that grubbiness is his form of autonomy. He's allowed one cigarette an hour, he waits for the big hand to settle on the hour the way a pregnant woman awaits her child's arrival.

Then there is Magda (from the ward for those with a psychological vulnerability). In her décolleté she carries a lighter, which she guards as her most treasured, perhaps her only, possession. She gets her cigarettes from the caregivers. She regularly asks me to take her out for a walk: Magda is confined to a wheelchair. We're barely out the door when the lighter is fished out of the décolleté and the cigarette is lit. The cigarette is barely extinguished, and she wants to go inside again. Back inside, she drinks coffee with milk and asks me my name.

Emile is all skin and bones, but drags on his cigarettes as though he were in the prime of life. This is a man who will go on smoking even after he is dead.

But the provision of meaning is not limited to the cigarette alone; there is also music. Etienne (early dementia ward), who is normally in a sort of catatonic state, has played the accordion for us, the guitar too, as well as the musical spoons. Fellow resident Marleen has sung Bill Withers' "Ain't No Sunshine". Rarely have I seen her so look so joyful. Later in the day, Marleen shouts that she wants to go home; sometimes the nursing home isn't home enough.

Roger (psychological vulnerability ward), an older gentleman, sits contentedly in his wheelchair with a guinea pig in his lap. He pets it tenderly.

Cigarettes, music and guinea pigs, that's all that's needed to provide meaning.

And, for some people: a smidgen of literature.

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Team coach Kas sits down beside me on the patio, he tells the story of 'Chicken George'.

"It happened in England," Kas says, "a long time ago, when caregiving was a different kind of thing. My father studied psychology there, but he couldn't find a job, so he went into nursing. He did night shifts, and his colleagues tried to test him out. They said: "The nights here are quiet, but there's one man, Chicken George, if he wakes up you have to take him down to the cellar and take off all his clothes." In the middle of the night one of the men woke up, he sat straight up in bed and started making chicken movements. My father felt uncomfortable about it, but he followed his colleagues' instructions. When the man calmed down, he brought him back to bed. The next morning the man woke up cackling. So he took him down to the cellar again and stripped him. These days we wouldn't cool down people's bodies like that anymore, but cold does have a calmative effect. As a child, Chicken George's parents apparently put him in the chicken coop all the time. And back in the old days they also used to put powdered sugar on bed sores, now we know that that really does help. A lot of the old treatments are coming back, perhaps in a slightly different form."

I'm going to give a writing workshop at the end of the week, and Kas says: "Be sure to ask Etienne. He can't talk, but he can still type."

When I talk to Etienne he stares at me, apparently without seeing me; I think about bed sores and powdered sugar.

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In return for the hospitality shown me, I give a writing workshop. Some of the residents, and some staff members too, need a little encouraging. Jana, a staff member, comes to me and asks to take part.

An acquaintance of mine, a qualified nurse, had told me: "You've haven't penetrated to the core of the nursing home unless you've seen pee and poop." Some of the residents are incontinent, but I haven't seen any pee or poop. The diaper often reveals itself only when pajama bottoms are put on: a skirt hides more than a pair of pajama bottoms does.

We work on our stories in the common sitting room. Rita, who has severe MS, is there too. I'm in love with Rita, because of her laugh. She can't move anymore, but she laughs as though she's seventeen. She writes: "I have a daughter who lives in Ostend. Not so long ago, we went out together there to eat mussels. Absolutely delicious."

Martine (early dementia) writes: "I'm wild about salsa dancing, I like to paint pictures." When she reads her text aloud, it makes her weep.

Some of the residents are sad because they will never get out of here. Happiness is the possibility of an escape, which is one thing nursing homes, offices, prisons and families have in common. Sometimes happiness itself is the escape.

Vanjuschka asks if I'll still be here tomorrow. "Yes," I say.

"Then you can do my makeup," she answers.

I close here with the full text written by Etienne, a letter to his wife. As mentioned earlier, he can no longer speak, he walks like a robot, sometimes he plays the accordion and he types: "Viviane, are you coming to see me today? I don't feel good! Regards, Etienne xxx."

(Translated from the Dutch by Sam Garrett.)