His Way

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His Way

“And now, the end is near. And so I face the final curtain. My friend, I'll say it clear. I'll state my case, of which I'm certain. I've lived a life that's full. I've traveled each and every highway. And more, much more than this. I did it my way.” I can still hear my grandfather’s tone-deaf voice belting this song from the bathroom. So full of life, he would walk into the kitchen with a large grin humming any song that was a hit in the forties.

*My Way* by Frank Sinatra was most definitely a favorite. Seeing me waiting for him in the kitchen, he would say “come over here!” in a lovingly aggressive way and hug me until I could not breathe. He thrived spending time with his grandchildren and spoke about how we were the only good thing about getting old. He hated losing the physical capabilities he used to have and how simple activities became more and more difficult. By last summer, he needed me to pour his drinks for him at family dinners as he inexplicably began to lose strength and motor control. However, he always had a sense of independence. Even when he walked a little slower or stopped playing basketball with me at every visit, he seemed so young for his age, mentally full of life, and capable of taking care of himself. I never thought he would lose that autonomy and liveliness so quickly.

My grandfather, known as *Zayde* (grandpa in Yiddish) was diagnosed with Chronic Lymphocytic Leukemia in 2009. I vaguely remember my grandparents asking my siblings and
me to play in the basement while they told my parents the news, but I did not know of his disease until this past summer. All of the adults in my family kept it a secret for nine years. My grandparents did not see a reason to tell us anything as the Leukemia was dormant and there was no apparent change in Zayde’s health.

Similarly to Simi Linton’s idea of passing, they have always kept medical conditions very private, as an attempt to seem normal. “Disabled people, if they are able to conceal their impairment or confine their activities to those that do not reveal their disability, have been known to pass” (Linton 229). Zayde successfully passed for those nine years. Only he, his wife, and his children knew of his condition. Besides periodic checkups at the doctor, his life went on the same as it had before. My memory of Zayde, until this past summer, is of a completely healthy man. That is the only image my grandparents wanted me and everyone else to have of them, as anyone would. Zayde just wanted to be viewed as normal, hiding the negativity and judgement that come with having cancer. He knew that the way others viewed him would change if they knew of his potential illness, and wanted to avoid hindering his healthy reputation.

The secret came out just two months prior to the Leukemia becoming active in July of 2018. My grandma passed away the February before, which brought up a larger concern for Zayde’s general well-being. My grandparents were always very co-dependent — they never spent a night apart in their fifty-five years of marriage. The loss of my grandmother unveiled the secrecy of my grandfather’s health. He became more dependent on my family for his general well-being, and my parents finally told me and my siblings about the dormant Leukemia. He could no longer pass as the completely healthy, young-for-his-age grandfather. The loss of my
grandmother took away most of my grandfather’s will to live. While he thrived spending time with his grandchildren, he lived for the love of his life, my grandmother.

My grandparents’ relationship was always something I have admired. Zayde being five feet and ten inches tall and Grandma being just shy of four feet and eight inches short, they were an interesting couple! Zayde was always boisterous and animated while Grandma was quiet and seemingly content. My dad says that Grandma was much louder during his childhood, but I never knew that side of her. They always held hands while walking and generally took care of each other. Zayde held the door for Grandma, helped her get into her seat in our minivan, and gave her his undivided attention. During holiday dinners, we would sing festive songs and Zayde always made sure Grandma had the spotlight. Music was one of Grandma’s favorite things. Their marriage was an old-fashioned love story of co-dependence and resilience.

Their bond was broken in February of 2018 when my grandmother went to the hospital for persistent hiccups. This hospital trip was the first time I saw Zayde cry. It was a cry I began to know all too well. She got diagnosed with pneumonia and passed away just nine days later at age seventy-five. Shocked by how quickly he was losing his wife, Zayde sat beside her bed with his head buried in his lap begging “this is too much” over and over. I hugged him and felt his body shake in mine, his voice quivering and contrasting greatly from the jolly singing old man I knew so well. My family was convinced that the loss of my grandmother would cripple him, but we did not expect it to do so quite literally.

While cancer is not widely considered a “disability” as opposed to a disease, I watched as my Zayde was weakened, mentally wounded, and stripped of everything that made him physically “able” in all seventy-eight years of his life. In the last month of his life, he lost his
ability to feed himself, sit up by himself, go to the bathroom, and celebrate life the way he had before the illness. The grief of losing my grandmother had already weakened his mental strength. “Characters with disabilities are always marked with ideological meaning, as are moments of disease or accident that transform such characters” (Davis 12). Zayde’s character had been entirely transformed from an animated and unconventional gentleman to a helpless and fragile old man. His illness became a defining factor of his identity to strangers, especially hospital staff, but never to me.

Zayde always had an irritable side, but it was incredibly difficult to keep his spirits up in the hospital. The only thing that would guarantee a smile was feeding him Herr’s Classic Potato Chips. Prior to cancer taking over his body, he would always remark his favorite foods as “exquisite.” He had a large appetite and a very particular taste. The most unique aspect of his diet was his love for seltzer. He would never drink water. No matter how many times we told the nurses to give him seltzer, we always returned to a cup of water next to his bed with the seltzer bottle out of reach. Something as simple as their insistence to serve the standard drink (water) proves the tyranny of normal that Lennard Davis speaks about as it shows how the staff automatically serve the regular, average choice. We would fill up a new cup of seltzer at each daily visit and hold the cup close enough to his face for his mouth to be able to reach the straw. The hospital treated Zayde like any other normal patient ignoring his quirks, including his animosity for water.

While I was in Zayde’s hospital room, one nurse had mistaken his name for Arthur when it was really Arnold. My grandfather looked over to me with wide, aggravated eyes unable to speak and correct the kind nurse with nothing but good intentions. My face was turning red
seemingly with anger while my mind filled with sadness as my grandfather’s identity was mistaken. The most difficult part about my grandfather’s cancer for me was seeing someone so full of life silenced by the disease that took over his body and the subsequent way others treated him. In *The Cry of the Gull*, Emmanuelle Laborit describes her struggle with her peers’ response to her disability, being deaf, by stating how she “… was sick and tired of being held prisoner of a silence they made no attempt to break” (611).

While there are clear distinctions between being deaf and having cancer, Zayde was held at the mercy of others without a voice or understanding for himself at the end of his life. It was exasperating for him to lose control over his interactions with others. We had to infer what he needed when he was too weak to speak or too confused to understand. There were many moments when the doctors would speak to my parents outside of the room, leaving Zayde to believe that he was in the dark about his own condition. While he was not in a state to make decisions about his health, losing that autonomy just furthered his aggravation and emphasized the “silence” Laborit mentions as part of the inability to communicate.

The nurse did not know the Zayde that I knew and loved. The nurse simply knew my grandfather as a sick, disabled man who he was supposed to cure or attempt to keep comfortable. If my grandpa was able to share his story with the nurse, he would have understood that cancer did not define his personality. In many ways, it directly contrasted it. I had always known him as a strong, loud, opinionated man. Cancer made him seem quiet and docile: two words I would have never used to describe Zayde’s personality, but the only version of Zayde the nurse knew. The ability to share your story “enables the disabled subjectivity in part to make itself, to take some measure of control and volition in its own construction” (Mossman 165). The nurse
inherently began to assume Zayde’s story for him as he did not know the autobiographical version. Zayde did not have “control” over the way others viewed him.

When passing a physically disabled person on the street, I always notice their disability first. Whether it is a cane, wheelchair, or facial deformity, I notice what makes that person stand out. Unfortunately, one who has a “somatic anomaly… [has] one’s life written for one” (Couser 458). I assume to know what that person went through upon first glance and always conclude that their disability is a defining factor of their identity. When someone has a feature that differs from the norm or lacks a feature, that characteristic becomes one of the first that stands out to strangers and the one that builds the stranger’s idea of them. That is the way the nurse envisioned my grandfather. It upset me to observe the way the nurse viewed Zayde, but he was just naturally reacting to a stranger’s disability the same way I do.

The reaction the nurse and I share emphasizes what Lennard Davis describes as “the hegemony of normalcy” and how it “extend[s] into the very heart of cultural production” (12). It is ingrained in society that a desirable life is one that aligns with the definition of normal in each respective time period. The dominating group or group of power decides what normalcy looks like. People of minorities or people in general who have qualities that contrast from the norm are ostracized or treated differently. My reaction to strangers and the nurse’s treatment of my grandfather are examples of the physically abled (dominating norm) treating the disabled differently and allowing their differing characteristics to be the defining ones. It is easy to conform to the norm, assume one’s story and reinforce the “hegemony of normalcy” when you do not know the person you are subjectifying.
While the nurse did not know all of Zayde’s story, I did. It was a unique one. Zayde experienced two different kinds of abnormals. On top of seeing how strangers treated him differently when he became ill, Zayde embodied a “deviance from the norm” in his previously healthy life (Davis 4). He challenged the definition of normal by testing the standards of fashion and disregarding the model for manners. He always wore shorts no matter how cold the weather, two jackets, a fanny pack filled with chapstick, and high white socks. He tucked a napkin into his shirt as if to create a bib rather than just placing the napkin on his lap and most infamously, laughed incredibly loudly without any care of the people around him. Throwing his head back, mouth agape, his laugh would catch the attention of an entire room. Zayde was never afraid to stand out and was always unapologetically himself.

I may have only known him as an old man, but due to my dad’s countless stories of Zayde during his childhood, his unique character was not just isolated to his time as a grandparent. One of my favorite anecdotes from my father’s childhood was when my dad was helping Zayde paint their house and got some paint on his hands. My dad could not get the paint off and as a seven-year-old boy, began to panic. Instead of simply telling my dad that washing his hands with soap and water would remove the paint easily, Zayde decided to humor himself. He told my dad that the absolute only way to remove the paint from his hands was to “rub shit on it.” Now even more panicked, my dad ran in the house, scrubbed his hands as hard as he could, and expressed his worries to my grandma who promptly told him to know better than to listen to my grandfather who often played vulgar but funny jokes on the family. My dad told me that he could hear Zayde’s infamous laugh ringing from the other room. He was an unconventional parent, to say the least.
Zayde told my dad that he thought I would be his most successful grandchild. Coming from a man who told his very young child to “rub shit on his hands,” you would not think I would be flattered. However, underneath, and partly due to Zayde’s twisted sense of humor, he was an incredible grandfather: one who would listen to me and my siblings go on and on about our interests, laugh at all of my jokes, and talk to us about real, important things. I was surprised that he thought I would be the most successful because my siblings did better in school, achieving higher grades and getting into “cream of the crop institutions.” They were certainly more successful according to the way society and those in current social power measure success. However, the reasoning he gave my dad was that I was the most grounded and at least as far as he could tell, I did not get caught up in the things that most teenagers do. He was right. I proudly and very outwardly did not want to be normal and fit into any box or clique that commonly organize high schools. It is clear that I stuck out to him because I valued unconventional things and challenged the definition of normal myself.

Another part of Zayde’s legacy that was left with me is the car he used most. I feel weird driving Zayde’s car and calling it my own. Driving was something that he always enjoyed and took pride in. Living an hour and a half from my house, he made the trip at least once a month. While my grandma slept in the passenger seat, he would take the wheel for every long trip. There was a pepper shaker filled with sunflower seeds left in a cup holder. Sunflower seeds were one of Zayde’s favorite snacks. While I may remove the cane from the passenger seat, add a University of Miami bumper sticker, and change his preferred radio stations, I will always keep a pepper shaker filled with sunflower seeds in the cup holder.
Immediately upon turning the car on for the first time, *Serious XM’s Sirious Sinatra* channel came on blasting *My Way*. My eyes filled with tears as I realized how parallel the words of the song were to my grandfather’s life. As he “face[d] the final curtain,” he “lived a life that [was] full,” and most of all, he always did it his way.

By only drinking seltzer, eating at least two ice cream sandwiches a day, wearing shorts, sporting a fanny pack everywhere he went, tucking in his napkin into his shirt rather than sitting it on his lap, having a startlingly loud and energized laugh, and having the most vulgar of senses of humor, Zayde was anything but *normal*. A few months after his passing, my family had a memorial dinner for him at his favorite restaurant. We went around the table and shared memories, each picking out our favorite weird quirk of his and his favorite curse words. Ultimately, we celebrated the true story of Zayde and how he always lived his life *his way*. 