On Christmas Eve, 2012, I participated in a service event with Occupy Sandy on Rockaway Beach in Queens, New York City. Several local charities gathered together to provide Christmas gifts and food for Rockaway residents who had lost everything in the storm and the flood two months before, at the end of October. My spouse and I had worked in a church kitchen in Brooklyn, the day before Christmas Eve, in collaboration with others, cutting apples, arranging dough in massive baking pans, to prepare apple crumbles for this holiday event.

But there were too many volunteers on the beach on Christmas Eve, and most of the volunteers were white. The residents, most of whom were people of color, had to wait in line for their gifts and food. The line stretched far beyond a fence topped with barbed wire, and the NYPD kept watch over the line. Inside the fence, we were asked to entertain the children while their parents and guardians...
selected donated Christmas gifts inside a small tent filled with tables of odd-shaped and hastily wrapped boxes. Outside the tent, in the chilled December air, volunteers dressed as fish and cats sang for the children. Other volunteers gave the children paper and safety scissors to cut out simple snowflakes from blue copy machine paper, while other volunteers invented running games for the children in area behind the tent. My spouse had accompanied me to the beach, and he tried working the food tables, overflowing with too many apple crumbles, edges crisp with chunks of brown sugar. But there were too many volunteers at the food tables, too many volunteers inside the tent with the gifts, too many Rockaway residents, standing behind barbed wired and NYPD security lines.

FLASH BACK: BEFORE THE HURRICANE

My spouse’s last bio-polar episode had coincided with Hurricane Sandy. His doctors had incorrectly calibrated his medications and his therapists had missed the growing confusion caused by lithium poisoning. These medical and mental health professionals had assumed the confusion arose from advanced age or from lack of self-care on the part of my spouse—until my spouse landed in the hospital with lithium poisoning. After leaving the hospital my spouse found himself with a psychiatrist who would not listen to my spouse’s concerns regarding treatment. When I was invited to participate in my spouse’s care as part of “family therapy,” this psychiatrist dismissed my own concerns as disruptive to my spouse’s challenging prognosis and fraught recovery.

I had lived with my spouse for nearly thirty years, and we were deeply knowledgeable of one another’s mental health histories, of treatments that had worked with our needs, and of treatments that exacerbated our difficulties. The psychiatrist had not been prepared for our work together as a healing team. On the surface, we appeared to identify as two white, marginally middle-class under-employed Midwestern transplants with PhDs in English. Yet the surface did not reveal the deeper story, and we could not convey to the psychiatrist the profound commitment of our relationship. As a team, my spouse and I had not been prepared for a psychiatrist who, when my spouse attempted to question the psychiatrist’s treatment, would threaten my spouse with hospitalization. When the psychiatrist refused to listen to my spouse’s
concerns, my spouse walked out of the mental health clinic and back home to our apartment, a distance of more than a mile across a busy thoroughfare.

In the interim, I fielded a phone call from the psychiatrist. The psychiatrist had reported my spouse to 911 as a missing person, which had alerted the NYPD. When the NYPD showed up at our apartment door, they seemed chagrined. Instead of the out-of-control mental patient the psychiatrist had described, the NYPD found a placid middle age man trying to cope with a debilitating psychiatric illness and a failed treatment plan. Because my spouse had been reported as a missing person in two separate jurisdictions, the NYPD had orders to transport him under armed police guard to the emergency psych ward of the borough’s main public hospital. I would be allowed to ride along in the ambulance. At the same time, the police suggested that I might want to turn down the volume on my anxiety attack. The police did not know that my anxiety arose from ADHD. In a situation that required extreme vigilance, I found that my brain could not process all of the contradictory evidence. My medical treatment for ADHD worked well in everyday life, but at the moment, my spouse and I found ourselves experiencing an extraordinary situation. The usual treatment for alleviating anxiety did not work for this particular contingency.

I tried to hold my tongue and out leaked tears. The tears pushed so powerfully that I feared I would break apart from their force. I cry when I feel angry, when I feel frustrated, when I feel as if I have no control over the course of events, and when I am then told that I am solely responsible for keeping my emotions under control. The aloneness remains the problem. ADHD explodes my attention as a star bursts spectacularly across the night. An exploding star disrupts sky and the view of the constellations, its pieces showering the atmosphere with light.

In the waiting room at the psych ward, after more than an hour had passed, I tried to gather together the pieces by following my breath. A family of women waited with me, anxious for the diagnosis of an elderly relative who the doctors were examining behind the locked doors. “How long does it take?” I asked. My reserve energy hovered
near empty. I tried to find words. “What are they doing with him back there?” The women switched from speaking to each other in Bengali to communicating with me in English. In both languages, I felt the patience of sympathy, the intonation of care that heals the self when the self reaches out to others. “I saw your husband behind the glass,” one of the women said. “The nurses brought him food. The doctors were gone, and the police too. Your husband should be with you soon.” I thanked the women and tried to believe the reassurance that all would soon be fine.

Another hour passed and part of another. Patients, families, advocates, and police filed in and out. I tried to find my breathing, scattered as I felt, pieces of me falling in the breezes all across Queens. My spouse gained release in the early evening. Three days later my spouse’s employment termination letter arrived by registered mail.

All this while Hurricane Sandy, 1000 miles long, churned in the ocean. The evening after my spouse lost his job, the floods began in New York City. We had plenty of food and water, and we lived on high ground, far enough inland to be spared from the worst of the catastrophes brought by the sea and the wind. Almost two months after the flood, we found ourselves on the beach at Rockaway, offering service among the charities.

CHRISTMAS EVE: “DOES ANYONE WANT TO WRITE?”

My spouse, after filling his arms with bottles of water, walked through the opening of the barbed-wire fence. He offered the bottles to the residents waiting behind the police line. I focused on the children at the art table who were cutting blue snowflakes with safety scissors. “Does anyone want to write?” I asked. One of the girls said yes. We worked on metaphors, first concentrating on how metaphors make meaning, then attempting to find language for a scene that had no words. The girl asked me to write down her ideas as she spoke. We made a mind map. All around us, volunteers were taking photographs. In my good winter coat, I sat splayed on the sand, working with ADHD’s gift of hyper-focus to listen deeply to the girl’s words and to figure out with her how to fit words into the web of the mind map I had drawn on a sheet of thin blue copy paper.
The girl and I wrote together about the plastic bags hanging like leaves from the winter-bare trees on the beach. We wrote about recycling. We wrote about Christmas and the act of giving. We wrote until the girl’s mother and siblings appeared with food and gift-wrapped boxes. “May I take your picture?” I asked the girl as we finished our work together. She hesitated for only a moment then said, “No, please. Don’t.” “May I take a picture of your writing?” I asked then, my thoughts overcome with the emotion of my wrong choice. I ought not to have asked to photograph her or her writing. Already so many volunteers around us, with their cameras and camcorders and cell phones, had disrupted her privacy. As a subject of charity, she had become the object of all lenses. She had not asked for any of this publicity. She wanted only to eat and to write.

I had forgotten that I needed to breathe, even as the girl said yes, that I could take a picture of her writing, and could not breathe still, even as I placed my finger on the camera icon on my cell phone’s screen. After the photo, the girl and her family ate lunch together. I worked a bit more at the art table and then my spouse came to find me. We took a photograph with the singing fish. Then we began the long journey home, first by train for a few stops, then by shuttle bus past the hurricane-damaged train stations, and finally to the subway train, backwards from Rockaway through Brooklyn and Manhattan, to reach our apartment in Queens.

**FLASH FORWARD: LESSONS FOR THE NEW YEAR**

As the New Year approached, I urged my spouse to look outside our limited health insurance network for a psychiatrist in Manhattan. He found a doctor who charged fees on a sliding scale. In the months that followed, my spouse responded well to the doctor, and the doctor offered my spouse an opportunity to shape his own prognosis. Meanwhile, in the wake of Hurricane Sandy that Christmas Eve, from close reading of the photographs I had taken on the beach, I had discovered the benefits of hyper-focus in attempting an act of mutual aid. Yet I remembered the contradictory impulses of charity and mutual aid, of service and altruism. I had learned how to access ADHD’s hyper-focus to write with a child, but with the anxiety of contradiction, I had forgotten that, in order to truly listen to her concerns, I had needed to breathe.
School started again after the holidays, and as I met once more with students, I began to practice hyper-focus more actively as a tool for teaching. In the classroom, as on the beach, I found myself separated from the students by categories of race, class, and education. Yet hyper-focus offered space for connection, as we concentrated on our relationships with history. The students and I met together as survivors of the twin historical upheavals of climate change and recession. We learned to listen to each other, asking each other to slow down our racing minds, and to open up our bruised hearts.

Nonetheless, the service on the beach never recedes. The moments of that Christmas Eve afternoon infuse my teaching and burnish my scholarship. Indeed, we need to move beyond the metaphor of breath to the material realities of breathing itself. Breathing connects us to our bodies and offers us fresh oxygen to maneuver through the processes and products of writing. Breathing together, we can learn to sustain optimism, to participate in self-care, and to begin to imagine a Future in service with each other. Beyond the barbed wire, the activity of the classroom can become a moment for this service, even as the act of breathing provides us with our greatest struggle—and our most challenging hope.
This year, Susan is teaching a section of Stretch at an American Indian Community in central Arizona, as well as a new practicum course in teaching Basic Writing. Her experiences with Occupy Wall Street, Occupy Sandy, and Free University of NYC, among the most transformative of her life, continue to inform her work in the classroom.