

## Soul Broker

“I’m not coming back and I’m not taking the pills anymore. It’s my body and you can’t make me.” Dara’s voice is loud and strident. She’s just emerged from her weekly counseling session and, as always, is in a foul mood. Everyone in the waiting room is pretending not to hear.

“Just let me talk to Dr. Smythe for a minute,” Lenore says quietly. She doesn’t get to sit in on her daughter’s sessions nor does she get a report on what went on during them, but Dr. Smythe always comes out afterward to hand Lenore prescription renewals, and that’s all she has, a minute to study Dr. Smythe for clues.

Dr. Smythe is not an easy read. She keeps her opinions shrink-wrapped inside an impenetrable layer of professionalism. But one opinion consistently leaks through. She doesn’t like Dara. To be fair, most people don’t. Of course Lenore loves her daughter, but even she has to admit there’s something fundamentally unlikable about her. Yes, Dara can be unpleasant, extremely so, but people recoil from Dara in a way they don’t from equally unpleasant teenagers. And the truth is, she’s always had this effect on others, even when she was little and cute.

“You *don’t* need to talk to her,” Dara says, shrilly loudly. “I am *not* coming back. She *told* me not to come back.” Her voice has risen to brain-freeze territory, somewhere between B-sharp and C-flat. Lenore has perfect pitch, a gift when she was young and aspired to a career in musical theatre, a curse now that she’s choir director at St. Luke’s.

What is keeping Dr. Smythe? Lenore sends the receptionist an imploring look.

“The doctor will be with you momentarily,” she says. “If you’d like to take a seat, please.” She’s a grandmotherly type with dimpled arms and a varnished helmet of sparse gray hair, equal parts comfort and strength, perfect for a practice specializing in affective mood disorders of adolescents.

“If you’d like to take a seat, please,” Dara mimics. It’s unnerving how accurately her voice parodies the elderly receptionist’s. But it’s not just her voice. For a second, Dara *is* the old woman. Or rather, the old woman turned inside out, her calm exposed as nothing more than cold indifference, her strength a poorly constructed wall as insubstantial as her see-through hair. This is what always happens when Dara looks deeply at something. It stands revealed. And then Lenore has no choice but to see it that way, too.

With a sweep of her arm, Dara knocks the sign-in sheet to the floor then storms out to wait for Lenore in the car. The Venetian blinds on the office’s door rattle behind her like machine-gun fire.

Lenore mentally trails her daughter through the university hospital’s halls, down the two flights of stairs off Wing B, through the heavy firewall doors leading to the subterranean depths of the parking garage. By the time Lenore joins her, Dara will have finished crying. She’ll be slouched in the passenger seat looking sullen and bored, but her face will bear the unmistakable evidence of tears, or rather, her efforts to erase them. Her cheeks will be chalky with a fresh layer of concealer, her eyes re-lined with a thick ribbon of Kohl. But there will be other signs Dara can’t erase, scarlet bruises that bloom like vicious hickeys on her thighs and underarms where she’s pinched herself. She’s been doing it since she was little, crying in secret, pinching herself when she does. Lenore will see the marks tonight when Dara comes out of her room in her sleeveless tee and underpants. Dara always makes sure Lenore sees the marks.

“Ms. Daveen.”

Lenore doesn't remember sitting down, but it seems she has, as instructed, taken a seat. A late middle-aged man stands before her. His frizzy white hair is an electrified halo framing a deeply lined yellow face. Einstein with liver disease.

“Dr. Gray,” he says. “Dr. Smythe's supervisor. Come with me.”

Lenore follows him through a maze of halls lined with closed doors. Dr. Gray stops before one and fumbles beneath his white coat at an enormous key ring fastened to the belt loop of his trousers. She glimpses a mushroom-white slab of belly as he selects a key and turns it in the lock. Inside, he turns the same key in a deadbolt. Maybe this isn't so unusual, Lenore tells herself. Maybe all psychiatrists' offices have deadbolts.

The only psychiatrist's office she's ever seen at the Clinic, during her initial intake, had a gray metal desk and a molded plastic chair on scuffed linoleum. This room looks like something out of a movie set: leather fainting couch, fat leather armchair, gleaming mahogany desk, a carpet as lush as a fertilized lawn.

Dr. Gray settles himself behind his desk and indicates that Lenore should sit. He opens the thick file on his desk and flips through its dog-eared pages.

“Dara,” he says. “Your daughter?”

“Yes,” Lenore admits.

“We've been seeing her two years now?”

“Three years this past May, right after she turned twelve,” says Lenore. “Gemini,” she adds irrelevantly.

“Taking enough pharmaceuticals to choke a horse. But now wants to stop all medication?”

“That's what she just said.”

“Good call. They aren’t doing her any good. Nor is the counseling. Wouldn’t you agree?”

How would she know? Dr. Smythe never tells her anything.

Dr. Gray steeples his hands, waits.

“Maybe the counseling *is* helping,” says Lenore. “Dara hasn’t gotten into any serious trouble. She hasn’t been permanently expelled from school or murdered any of the neighbor’s pets. That I’m aware of.”

“Let’s dispense with the levity, Ms. Daveen.”

“I wasn’t being levititious,” Lenore says.

“Flippancy is a crutch, Ms. Daveen. You can use it to hobble along for only so long before it lets you down. After which you’ll blame the crutch and tuck a new one under your other arm. Time to face facts, Ms. Daveen. You’ve run out of armpits. Let me say this directly, in order to avoid all confusion and misunderstanding. We cannot help your daughter.”

“But there must be *something* we can do,” she protests. “Doctor, what’s *wrong* with Dara? No one seems to be able to tell me.”

“Pharmaceuticals and counseling will not cure what’s wrong with your daughter,” he says.

“What are you suggesting then? Hospitalization? My insurance . . . you’re not suggesting hospitalization, are you?”

“That wouldn’t help, either,” says Dr. Gray. “Not if you had all the insurance in the world. You’re welcome to seek a second opinion, of course. More to the point, how much energy are you prepared to waste on an endless, hopeless run around?”

“Are you saying there’s no hope?” says Lenore. “I can’t accept that. I won’t.”

"I didn't say there was no hope, Ms. Daveen. Sit back down, please. And keep an open mind. I see you're Catholic. Practicing?"

"I go to Mass," Lenore says. "I can't get Dara to go with me."

"I've read the file. I want *your* thoughts. How deep are *your* religious convictions?"

"Are you suggesting a faith-based program? I can tell you right now, Dara will not buy into that."

"I'm asking you, Ms. Daveen. You. How strong are *your* religious convictions? Do you believe in God the Father Almighty, Maker of Heaven and Earth? In all things seen and unseen? The mysteries of faith? Tell me, Ms. Daveen. Do you believe in the soul?"

"I suppose," Lenore says carefully.

"Then listen carefully. Open your mind, your heart, your own soul. Above all, don't speak. Don't solidify your opinions by speaking them aloud. Do you agree to these conditions? If so, I will tell you what's wrong with your daughter."

Lenore nods.

"She doesn't have one," says Dr. Gray.

"Doesn't have . . ."

"A soul," says Dr. Gray. "She doesn't have one. Don't speak. Just absorb that for a minute. Now answer honestly. The thought has occurred to you?"

"Not quite in those terms," says Lenore.

"Think of it in those terms."

"You're speaking metaphorically," she says.

"No."

"Then what *are* you saying?"

“What are your thoughts on exorcism?”

Lenore doesn't know how she's supposed to answer.

“You had Dara baptized?”

Again, Lenore nods.

“You know that Baptism includes an exorcism rite?”

Lenore, weeping now, searches her handbag for a tissue. She can't find any, not even an old used one. And there are none on Dr. Gray's desk.

“Do you,” Dr. Gray thunders, “*believe?*”

“Yes!” Lenore cries. “I believe! Exorcise her! I'll sign! If that's what you think will help. If that's what it takes to keep Dara as a patient.”

“Wouldn't work,” says Dr. Gray. “No soul to exorcise. As I've already indicated. We see a lot of it, these days--soul deficit. Your daughter exhibits the classic symptoms. The profound inner darkness. The way the light seems to dim when she enters a room. Those lacking souls swallow light—or what might poetically be referred to as light. Joy, if you will. They're vacuums, black holes, stars that have collapsed in upon themselves, so dense even light can't escape. Everyone feels their own little candles flicker and dim in their presence. That's why people instinctively move away from your daughter—she blows out the candles on other people's cakes. No need to punish yourself for having the good sense to move away. But you do need to confront your fears. And what you fear most is your own daughter. Yes?”

“Yes,” Lenore whispers, though Dr. Gray is a close second.

“It's always the nicest, most giving people who fear that vacuum most,” says Dr. Gray. “They know, intuitively, they can never fill it, and more, if they try, they'll lose the best part of their own souls, their own stash of goodness, if you will. And then who will

they be, when they have nothing left to give? Ms. Daveen, you cannot fill her vacuum. You cannot save her. Not alone.”

Lenore blows her nose into a Wal-Mart receipt.

“Ms. Daveen, you are not alone. Dara can be made whole. How, you ask? Infuse her with a soul, of course. It can be done. I assure you, it can be done. Say but the word and her soul shall be healed.”

“But *how?*”

“Doubt asks how. Faith answers with a simple yes.”

“You can’t expect me to say yes with no questions asked,” Lenore says. “Where do you get this ‘soul’? From people who have organ donor stickers on their driver’s licenses?”

“Again with the levity. A soul is hardly an organ. And dead ones are . . . beyond our control. We don’t play God here, Ms. Daveen. If it’s God you want, go to church and say two Hail Marys and one Our Father. Let me know how that works out for you.”

“But . . . *how?*” Lenore persists.

“This . . . procedure is based on scientific principles, I assure you. But it does require unquestioning commitment on your part, a leap of faith, if you will. Which doesn’t make it so different from any other accepted, aggressive medical intervention. Chemotherapy, for instance. Cancer patients with hopeful attitudes are more likely to recover—the literature supports that. Think of it as chemotherapy. A few nasty side effects, maybe, but still, one that works best with a healthy dose of faith. Bottom line--you don’t need to understand. But you do need to believe. Belief is key, especially with experimental procedures. There’s a trial going on now, which I could get Dara into. Of course, as in any trial, there are control groups that get placebos, but I’m in a position to see your daughter gets the real stuff. Which does not exempt you from truly believing.”

“Will it hurt? I will not subject Dara to a painful procedure.”

“Pain,” says Dr. Gray thoughtfully. “Does the infusion of a soul . . . hurt?” He appears to be conferring with himself. “Birth is as painful for the infant as it is for the mother. But only human infants—most of them anyway—cry when they find themselves thrust into this world. Why do you suppose that is? Why is a healthy human baby’s first utterance an inconsolable wail? Have you ever witnessed the birth of an animal? A puppy, a kitten, a piglet? Do they use their first inhalation to expel a long protesting howl? No, they do not. And why not? Well, I leave it to you to supply that answer. Food for thought.”

“Dara did cry,” says Lenore.

In fact, Dara had emerged from the birth canal wailing. Her cries had ricocheted off every stainless steel surface in the delivery room. And so had Lenore’s. She’d wanted to knock down everyone who stood between her and her baby. But she couldn’t. Her feet were tethered in stirrups on either side of the delivery table—to avoid injury to the infant during a difficult natural birth, she’d been told, which she’d accepted when she was in labor, but not afterwards. *Give her to me*, Lenore had cried, over and over, until someone pressed a hard plastic mask over her nose and mouth and told her to breathe, breathe, as if she had a choice.

“Dara *did* cry,” Lenore repeats. “Open the door.”

“I seem to have misjudged your commitment. To your daughter, to her recovery. Nice, giving persons like yourself do have a tendency to cross the line between generosity and co-dependency. You’ve crossed the line Ms. Daveen. She’ll take everything you have until you have nothing left to give. Ms. Daveen, you are dangerously close to having nothing left to give.”

“I don’t believe it. I *don’t* believe. Let. Me. Out.”



“But didn’t I distinctly hear you say you *did* believe? In *exorcism*, for God’s sake? Which quite naturally led me to believe there wasn’t anything you *wouldn’t* believe in.”

She runs to the door, pounds on it, cries, *Help! Help!*, rattles and twists the knob. Miraculously, the door opens. She flies down the hallways, through the waiting room where mothers look up from their magazines and the receptionist gives her a sweet, vacant smile, out into the corridor, down the two flights of stairs off Wing B to the basement where she throws all her weight against the heavy fire-wall door.

The parking garage is dark and humid and thick with smells, but slowly, as her over stimulated eyes forget the hospital’s bright fluorescent lights, the subterranean garage takes shape around her--the stained moist walls, the low ceiling’s long cement ribs like an urban version of the belly of the whale. Where is her car? Where did she leave her car? Dara is inside. Crying. Hurting herself.

But no. There she is. Standing with her back to Lenore by a waist-high stainless steel ashtray less than fifteen feet away, smoking. Something stops Lenore from rushing to claim her. Several things, actually. She’s not sure which she finds most surprising or why it seems necessary to arrange them into a hierarchy. That Dara is smoking goes to the bottom of the list. More surprising is that Dara is not alone. She belongs to a small circle of smokers who seem to be having a marvelous time. Their high-pitched laughter bounces off the concrete walls and ceiling. How is it possible that this group, any group, could be having such a marvelous time given that, despite that, Dara is among them? And--*this* is the most surprising—Dara is laughing with them, her head thrown back, the raggedy ends of her hair dancing between her scapulas above her halter top.

Lenore’s eyes continue to adjust to the dark. The people in the circle grow sharper edges. She sees a stick-thin old man attached to an IV pole in a hospital gown,

unlaced work boots, and a wide-brimmed straw hat. A middle-aged woman with a wide shaved path of staples down the middle of her head, the fuzzy tufts standing up on either side like a reverse Mohawk. A thick-waisted nurse in an old-fashioned uniform complete with a starched white cap. A boy in his early twenties with the sensitive face of a young Elvis, a face made even more heart-breakingly beautiful by his twisted body and the palsy that afflicts it. His arms twitch in wide spastic arcs as he tries, without success, to connect with his cigarette.

You shouldn't be smoking anyway, Lenore wants to tell him. None of you should be. But she says nothing. At first she hears only pieces of conversation. *Borrowed time. Best kind. In my former life.* Then, as if her ears have also adjusted, whole sentences. "Already told the undertaker," says the woman with the reverse Mohawk in a bronchial whiskey rasp. "Lay me out on my stomach and put a sign on my back: Kiss my ass." The old farmer attached to the IV pole is saying something about a prize hog, Sir Bertie the Swine, largest ever, still a record in Kentucky, look it up. *Myself, I'd go like Sir Bertie today,* he's saying. *Heart give out trying to breed.*

*Could happen,* says the nurse. *You got a private room, right?* Fresh laughter echoes off the concrete walls.

A calm silence follows as everyone draws on their cigarettes. Lenore watches as Dara guides the boy's quaking hand to his lips so he can take a long, deep drag. They inhale, exhale, inhale again. Lenore finds herself patterning her breathing to theirs, feels the almost imperceptible death that occurs between the letting go and the drawing in.

Her eyes have completely adjusted to the dark now, or rather, have over-adjusted, because their pale faces have taken on a kind of glow, a subtle incandescence. Of course it's just the contrast of dim objects separating themselves from the dark the way they always do when you look long and hard enough. Still, there's

something magical about it. As magical, and ordinary, as gazing at a flat crescent moon and then perceiving the shadowed sphere it floats against, the moon in its entirety, the dark unlit side the very piece that makes it whole.

Lenore thinks of the elderly receptionist again, first as she always had, then after Dara's gaze turned her inside out. It had been like staring at a Magic Eye picture, senseless wavy lines abruptly transforming into a three-dimensional picture. Lenore feels it again, the sick dizziness, the sudden irrational fear that she'll lose her footing and fall.

Because what would happen if Dara turned her dark gaze inward and looked as deeply at herself as she looked at others? What would she see? And then what would Lenore have no choice but to see? There'd be no surviving that fall. They'd both be lost, she and Dara both, because what child is not her mother's soul?

*They're black holes, Dr. Gray had said, so dense that even light can't escape.*  
But he was wrong. There is light. And she's seeing it because Dara can.

"Dara," Lenore calls, so gently it's almost a question. She wants to see Dara as these others see her. And she wants to know what Dara will see, or won't, when she looks at Lenore with a clean, unclouded gaze. Of course she's afraid. Who wouldn't be afraid of a mirror that can reveal you at your worst? Lenore composes her own face, because of course it goes both ways when one mirror is held up to another.

Dara flicks away her cigarette as if she thinks Lenore can't see her with her back turned. Then, with studied casualness, she swivels her head in Lenore's direction. A doughy cup of ear pokes through her raggedy hair. Six metal studs glint in the dark. Dara hates her ears—Dumbo ears, she calls them—yet she accentuates them with earrings that look like miniature nails.

"Dara," Lenore calls, again. Calmly. Carefully.

Dara makes no move to join her, but she does turn to look at Lenore. She sees a tinge of worry on Dara's face, an echo, maybe, of the look she's seeing on Lenore's. Worry will always be part of the infinite images they hold up to each other. So will hurt and anger. Lenore looks through them. A new picture snaps into focus: Dara, her face as open as a question.

Behind her Lenore hears a jangle of keys, the clink of a metal lighter, smells the heavy stench of cigar smoke.

"Don't tell me you can't see it," Lenore says to Dr. Gray. She doesn't need to turn around to know it's him.

"Bright as the moon," he confirms. "Which, counter-intuitively, has no light of its own."

"Still, it's beautiful."

"Beauty's in the eye of the beholder, Ms. Daveen. Bottom line, you need a beholder."

Lenore stops hearing him; his voice has fallen between the cracks in the audible scale. All she's aware of is Dara. Dara has turned away from her, back to the group. But she has, Lenore notices, shifted to create a small space beside her, an off-handed invitation that seems to say *Whatever*. Lenore can almost hear Dara saying it, in an off-key B-sharp tone that pulls itself down, with brave effort, toward a near, but not quite, pitch-perfect A.