

THE HEALTH HUMANITIES JOURNAL

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Exploring ideas related to health, illness, caregiving and medicine

Jane F. Thrailkill | Adviser's Note | Spring 2020 $\sim Now \sim$

Dear Readers,

Already the beginning of spring break seems a world away, though as I write it's been a scant two weeks since the last day of real-time, in-person instruction at UNC. Each day's headlines herald an exponential increase in (known) COVID-19 cases as the virus spreads to new locations. We hear daily about more closed borders, stranded Americans, stock market declines, and shortages of clinical essentials. Writing about life as it changes under plague conditions is like "seizing a spinning top to catch its motion," to use a phrase from philosopher William James.

Yet part of what's weird in this new abnormal is the way time also slows down. Almost halfway into my two-week home quarantine, each day seems to stretch on and on. I read, I write, I plan, I prepare. Housebound, I stare into my computer screen, connecting with colleagues and students as we touch base and arrange to take UNC classes on line. Yet my Zoom-centered day is punctuated with real homemade meals; I now pause to sit down with my husband and college-age daughter, whose semester abroad in Spain was cut short by the virus. We peruse news sites, reading out passages and comparing information.

There are other paradoxes. In quarantine, I practice physical distancing (except with my fellow inmates) yet I am more social than ever. I join with four friends for computer-enabled pilates. I correspond with far-flung loved ones, play bridge with buddies using the Trickster Cards app, go for cautious walks with our dog Bo, and wave thanks to

kind friends who deliver fresh vegetables to our back porch. The ties that bind seem tighter, suspending us in a web of relationships.

The look of life is different, too. Our cars sit idle in the driveway, and a 2,000-piece jigsaw puzzle occupies our dining room table. The skies are now mostly free of contrails and the air is fresh. Quarantine feels a little like time travel, back to the nineteenth century, or before.

Yet what plunged my family into this strange hiatus felt like an action movie, fast-paced and dramatic. Spurred by the ease of international travel, my husband and I squeezed a trip to southern Spain into a brief spring break. Two remarkable Saturdays bookended our journey: the first, a languid immersion in the pleasures of southern Spain; the second, a mad dash for the border.

Arriving on Saturday, March 7, we wandered the streets of Seville, marveling at the packed tapas bars, convivial cafes, and pre-Easter church pageants. Liturgical incense mixed with the heady fragrance of orange blossoms; congregants carried a life-sized effigy of Jesus in solemn procession; families ambled with children and babies late into the evening. Apparently COVID-19 had not tampered with the rich cavalcade of Spanish culture!

My literature-professor superego worried: were we in a modern version of Edgar Allan Poe's "The Masque of the Red Death"? In that story, privileged, oblivious revelers party on, while a deadly plague lurks among them.

On Wednesday, March 11, we had a jolt: the U.S. president announced a ban on travelers from Europe, beginning two days hence. The news arrived in the middle of the night. Groggy and disoriented, we searched online for immediate flights home, finding crazy itineraries (four stops! through Dubai!) for a price equal to a year of UNC tuition. Swiftly, we learned U.S. citizens were exempt: we could fly home from Seville as planned.

On Saturday, March 13 the axe fell: the Spanish president declared a state of emergency. All shops, bars, and restaurants had to close, *now*. People had to stay inside. Dazed by this news, we learned that our flight home was canceled. The borders were closing; Spain was a hot spot. Traffic on the internet made rebooking impossible and the airlines weren't answering their phones. We were stranded. By then the sun was setting in Seville, and everything was shut down. In the U.S., however, it was early afternoon. My husband called his brother in New York, a wizard at planning travel. Minutes later we were booked on a flight home. The only rub: the plane departed from Lisbon. We had to find our own way across the Spanish-Portuguese border.

As night fell we rushed to Plaza de Armas, Seville's bus station. Minutes before the kiosk closed we purchased tickets on the midnight bus to Portugal. We joined a couple dozen scared travelers, waiting. Most wore surgical masks—an item absent from the bustling streets and cafés mere hours before. It took six hours to arrive in Lisbon. From there, we caught our flight, landing outside of New York City. (No North Carolina airports could take travelers from Europe.) Afterward, we learned that Spain closed its borders to land travel hours after our departure. In a week, Seville had become a ghost town.

Now, in the bubble of quarantine, our mad dash is already a memory. We are in the zone of uncanny domesticity. For us time is suspended. Yet the clock ticks ominously as healthcare workers, first responders, grocery staff, and local governments prepare for an exponential increase in people suffering from COVID-19 and the respiratory distress it can bring. The longer our state of uncertainty continues, the more the precarious

among us will hurt, from lost income, social isolation, and the myriad sorrows that plague living brings with it.

The health humanities favors the individual story, affirming that biomedicine and science-based healthcare alone cannot fully speak to the human experience of illness and mortality. And yet, because our human imaginations can flag when faced with the scale and pace of a pandemic, we need to listen to the epidemiologists, computer modelers, and tireless public health experts as they strive to help us comprehend what is to come. The "flattening the curve" graph, with its elegance and clarity, may save thousands of lives. Handwashing may be the great technology that keeps us safer.

Now more than ever, we also need humanists, poets, and artists to give voice to individual experiences, so that the quiet suffering—as well as moments of courage and beauty—isn't submerged in the onslaught of cases and mournful statistics. And crucially, we need good government, because without the healthcare system, transportation network, and infrastructure that supports our vast democracy, we would surely be lost.

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Please think of this adviser note, written in what may now seem the distant past, as my message in a bottle. The speed of change can be daunting, even paralyzing. I invite you to share your own stories about living in a pandemic, and if you are willing, to send them to the editors of the *HHJ*.

I also hope that you will bring your health humanities understanding to others, to parents and friends and neighbors. Thinking in terms of culture, stigma, power, empathy, point of view, metaphor, narrative, and the social dimensions of health and wellbeing are powerful tools at this moment.

My profound wish is that all of us continue to expand our understanding and to practice compassion as we collectively adapt to life now. I end with words spoken by a physician in the novel *The Plague*, by Albert Camus: "That's an idea which may make some people smile, but the only means of fighting a plague is—common decency."