

Volume 11 Issue 3 2017

The Silver Swan and Her Stroke: First Songs as Last Songs

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The silver swan, who living had no note,

When death approached, unlocked her silent throat;

Leaning her breast against the reedy shore,

Thus sung her first and last, and sung no more.

Farewell, all joys; O Death, come close mine eyes;

More geese than swans now live, more fools than wise.

-Orlando Gibbons, 1612

She had a life-long embodied elegance of a swan, having been a rhythmic gymnast trained by those who learned directly from the Hungarian choreographer Laban. Mother's movements, honed in the

1930s on the white sands of Pärnu, Estonia, her hometown on the sea, were exquisitely attuned to music. Yet likely she never had an inkling that she'd become like a silver swan, who waits a lifetime to unlock her musical notes.

One night, cousin Adele, with growing nervousness, drove to the small New Jersey Cape Cod where my mother had been living alone and—mostly—self-sufficiently. At 92, she still paid her own bills, cooked, and in summer grew lettuce, dill, and mini-cucumbers side by side with flowers in the crumbly, dark soil she had cultivated. Cosmos were her favorites, along with the double-blossom orange tiger lilies that my brother had brought home from the railroad tracks nearly six decades ago. Though devoted to each—her son and those special wild, old lilies—bitter sweetly, she outlived both.

In winter, despite our protests, she swept snow off the brick steps and walkway. Likely it was only pain from the hip operations she'd had in the last decade that persuaded her that the driveway could be cleared by someone else. For this, one of her better solutions last winter had been to barter for services with the young fellow she saw shoveling snow across the street. From the doorway she called out in her accented high voice, "Halloohh stheere!" For years, she had been an avid and creative knitter who made up intricate, colorful patterns in her mind's eye as she clicked the needles. Promptly, a freshly-knit ski hat perched on the fellow's head. Mother had drawn it right over his hair as he got to the door, eyeing with tilts of her

head, tugging right and left, straightening and then nodding with approval over how it looked on him, and then thanking him for having cleared space for her visitors. Like many who came into contact with her, he was surprised and charmed.

Reluctantly, mother had given up driving; now, her primary need was to be driven out for grocery shopping and occasional appointments. One week in early March, when she hadn't picked up the phone for two days, it was not unreasonable at first to think she might have happened to be outside completing some chore, or that she might be on one of her accompanied weekly outings. These could easily last three to five hours. She loved the Korean market most, inspecting every tomato and bin of green beans in the produce aisle; at the local A & P grocery she captivated (or pestered) the man behind the deli counter with all the reasons why she was choosing a particular liverwurst or potato salad, never deterred by the line behind her. In fact, she sometimes turned and engaged them in the conversation as well, with "Don't you sthink so, too? Sthe little bit of egg and pickle make sthis one more..." She would search carefully for just the right English words. "... Hear-tee." Hearty.

But now, after the third day with no answer by telephone, cousin Adele arrived at nightfall to a locked, pitch dark house. Mother lay crumpled in a room of carnage. The bedside phone and its unplugged cord lay on the floor, surrounded by objects strewn helter-skelter or pulled in desperation—a trove of coins scattered over clothing and photos of grandchildren from an over-

turned shelf; mementos, the contents of her purse and colored yarns; one of the Styrofoam heads meant for her knitted hats lay bare. Mother was motionless on a damp, cold bed covered only by a pillow over her face. She had suffered a major stroke. The infarct may well have struck three full days earlier, and we can only imagine her hellish survival.

Mother had never been an openly defiant person in public. In fact, she was deferential by nature or upbringing. For example, there was always that northern European reserve in play, the kind that produces sentences like, "One wonders what one is doing tonight," which is actually meant as a question to the other person.

In the midst of tragic circumstances, those of the stroke and the ones that were re-triggered from a lifetime of excruciating events, I finally understood that her defiance was internal, rooted determination. Simply put, it was her will to survive overwhelming destructive forces, something she had begun as a refugee with three young children during World War II.

Consider here what I witnessed after her stroke. It was, once again, an adaptive life force formed under the direst circumstances, but this time it was so rare in its distinctive characteristics. One day I walked in on my mother singing with full power and nuance, like a glorious Wagnerian soprano. Truly, imagine the soaring, high phrases

of Birgit Nilssen, the legendary Swedish singer, backed by full orchestra. That was the tonal quality. Mother's lyrics, however, were spontaneously invented Swedish-sounding phrases, though Swedish is not her native language nor has she ever spoken it. She had facial expressiveness, arm and hand gestures relevant to her affect and intent, such as spiraling, outstretched arm salutations, pointing, uplifted arms, and occasionally a grieving bowed head and drawn shoulders. It was a genuinely dramatic stance, narrated in voice and full body, even though she was sitting in a wheelchair. Much else was incongruous, such as: she was 92 years old, had experienced a horrific stroke a couple of months earlier that left her unable to speak with meaning (Wernicke's aphasia), and well, quite frankly, had never really properly sung before—at least not with actual musically relational pitches.

She was in the hallway of a psychiatric facility and you may be tempted to think she was simply fueled by craziness. No, she *wasn't* crazy; this was confirmed by the Head Psychiatrist who, after examining her, asked us why in the world had she been rushed there by ambulance from a rehabilitation facility. "She doesn't belong here," he added.

"She threw a cup of coffee at an aide," my sister answered.

I added angrily, "At an aide who was continuously abusive toward her."

Not only was Mother sane, but she was also clearly fighting to survive as a functional human being. I say this based on one essential observation: *she was singing in tune*. Bolstering my view is the fact that I'm a musician and classically trained singer with acute hearing; my scholarly pursuits focus on vocal development from birth onwards; I work musically with neurodevelopmentally-challenged, non-verbal children, whom I often cajole to communication with singing. And, crucially, I know my mother's voice.

We are descendants of "singing peoples" of the little Baltic nation, Estonia, which delivered the "Singing Revolution" for freedom from the then-Soviet Union. Consequently, it is no exaggeration to say that everyone participates in singing, even the people who have an out-of-tune singing voice. All my life, I heard my mother vocalize like something I can only describe as sing-song words landing on cotton candy; precision was not even on the horizon.

So, bewildered, standing in the hallway of this grand hospital on a hill, unnerved by the circumstances of her stroke and our rapid descent into Health Care's Administrative Hell, I was overcome by awe and hope when I heard her strong voice ring out perfectly in tune.

"How can you tell?" asked my sister. "She's not singing anything we know."

"It doesn't matter," I exclaimed. "The notes are in tune *with each other*!"

Ahhhh. It was too difficult to explain. If only Oliver Sacks were here, I thought—a famous neurologist who has published neurological insights into his own musical experiences—he would be inspired. The rest of the family was impressed by how robust mother's singing was, and how de-

spite her diagnosis of fluent aphasia (i.e. producing words that make no sense), the right words would now emerge when we sang songs from her childhood.

"Yes, yes, this pleases me, of course," I said to my sister, not wanting to dampen the enthusiasm, but I knew that more commonplace factors were at work. Because of cross-domain brain processing of speech and music, melodies may evoke words in aging, dementia, and even after a stroke, even though normal speech is robbed.

I also had read that post-stroke patients often undergo "personality" changes and may become more assertive or even aggressive, so the fact that our formerly mild-mannered mother's singing was louder and more confident, even strident at times, didn't surprise me as much either. In a way, it was similar to the lack of inhibition that allowed this politely raised European lady to hurl a cup of coffee at the bad attendant back in the rehab.

No, the truly miraculous process here, I believed, was evidence of the brain's plasticity—even at age 92, even after a massive brain injury. In order for her to sing this way (in tune), neurons in her brain had to rewire, grow new associations and interact in a complex auditory-perceptual-muscular action feedback loop to accomplish this new skill. Perhaps it showed that she did not have true congenital *amusia* to begin with, but the fact is that she had exhibited near tone-deafness up until this point. With children, or typically functioning adults, relative tone-deafness is something

that can be improved to an extent. But who would expect it at mother's age and in her medical state?

My view was that upon cell death in the specific speech-centered region in the left hemisphere that rendered her speechless, my mother's mind and brain made a desperate and heroic effort to recruit a (musical) part of the right hemisphere that was intact. The result was some kind of expressive vocal communication that could be combined for intended effect with other modes of expressiveness, such as gestures and facial expressions. As significant, it's recently been discovered that oxytocin, a powerful endorphin that produces a calm sense of well-being, is released by singing. Thus, she achieved both self-regulated, satisfying calmness as well as a kind of basic interactive communication. I was over the moon about it and kept trying to find ways to convey to everyone just how amazing were mother's efforts to save herself.

Ironically, in the end, the hospital on the hill, which I actually appreciated because it had the air of an old fashioned, restful sanatorium compared to hectic, dismissive, or abusive rehabilitative facilities, asked us to take mother away because "her continual singing was driving the staff nuts." Shocked, I realized they were serious.

They had let her impending transfer slip by for some time, as we looked for solutions to her continued care. But now, not only had they endured enough of her unusual, life-affirming talent; the social worker also stunned us by adding that with such a characteristic, she doubted any place else would take her either. I asked why they couldn't

sometimes sing with her, like we did—much to her joy and enlivenment and that of other patients. After all, this was truly therapeutic and made her continued life bearable and meaningful; it deserved recognition and deep support. It was an extraordinary self-initiated process that reflected the subtle possibilities of recovery within aging and massive trauma.

Eventually mother's singing, any vocalization, faded to null. When she died, at age 94, she was as silent as the silver swan, who "when death approached had unlocked her silent throat ... sung her first and sung her last and then sung no more."

For a time afterwards I thought that was the whole story: even if I never totally understood the science of it, it still felt miraculous, and I simply wished the world could have heard what I did, experienced the full wonder of it. Then, in a writing workshop, I shared a version of this piece with a small group who had been together for years.

After a silence, someone said, "What a gift." By not blinking I withheld tears at the brim of my flooded eyelids, and murmured, "Yes, she gave

us such a gift."

My long-time writing companion, a clinical psychologist, looked directly at me and said in his deep voice, "No, it was her gift to *you*. She did it for *you*."

I shook my head, no; he misunderstood.

Very slowly, he said each word until it formed the full sentence, "You are the only one who would have received the full value."

The exhilaration and feat of joyous singing, my God, it had been an elixir my whole life, what I loved, and she knew it from the time I had been nicknamed "Little Songbird." I burst into full sobs. "With intent? But that's impossible."

The unrequited love of a mother with whom too much never got settled, the love of a mother whose fluttered song-like lullaby—the one she heard from her own mother in Pärnu, and which is one of my first memories—all coalesced in feelings and sounds that washed over me in that instant. Were these first and last perfectly sung sounds saying, "See, don't fear, I'm not done for yet. Hear me, these are your sounds, we can be here together"? I know no one can verify this with certainty. Wishful thoughts, they may say. But now I sing that hauntingly beautiful Orlando Gibbons song, as in my performances long ago for lute and soprano, when Mother sat in the aisles, and I close my eyes, lean my head on remembered breast. On such a reedy shore I sing about and to her, the silver swan.

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