Catching Her Flying Kisses

Life is ephemeral. There is only so much to enjoy. From birth to adolescence to adulthood, the individual experiences the beauties and pains of life. Living as an actress and model, she traveled around the world, enfolding the raptures of new adventures. Living as a single mother, she spent most of her days working tirelessly for her kids while simultaneously balancing the yin and yang of life. Living as a chef, he savored the relish of Risotto Alla Milanese, satiating the hungry. Yet, the time comes when these individuals capitulate to vulnerability, in which they are not in control of their lives but instead fettered to the inevitable incarceration of fate. The once diligent efforts begin to fade as the body enfeebles the mind and soul. Moving into a dreaded facility, they lie on their death beds while contemplating the last seconds of life in forlornness and agony.

Every Saturday morning, at 7 AM, I wake up, brush my teeth, grab some breakfast, and transist to this residence where the almost-lost souls live. Labeled as a place of death, the hospice elicits thoughts of contempt and pity as many (including my relatives and friends) commiserate my courage to visit these “dying” individuals. Yet, most of us fail to realize that the terminally ill come to the hospice not to die but to live the last moments of their life in quality care and peace. It is not a place of sorrow or pity but a comfort zone free from the afflictions and tensions of life. Empathy unlocks the key to a mutual bond, enabling the common citizen to share the pain of dying with the patient.

As I enter the building, the gush of the “hospice smell” enveloped me. Painted with a light tint of mustard yellow, the walls accentuated a welcoming and congenial ambience, perpetuating throughout the facility and nursing staff as well. Walking down the dimly-lit hallways, I take my mini-crash cart and enter each patient’s room to refill their water pitchers—most of which remain untouched—with icy cold water. The majority of patients lay unconsciously on their beds while listening to Channel 207’s instrumental or spiritual music on the television. The conscious ones are mostly phlegmatic and frequently remain silent, ruminating through endless thoughts.

Yet out of all these patients, one old woman anticipated my visit every week. I called her “Pari” since her real name was too difficult to pronounce. The first day she entered the hospice, her lively spirit enlivened the lusterless morning of the nurses and volunteers. She spoke at least five languages and interchanged between each one, even though none of the hospice staff could understand her. Nevertheless, the language barrier did not obstruct us from bonding a close relationship. Every morning I fed her minuscule amounts of thickened apple juice, mashed oatmeal with a carton of milk, and
some egg porridge—her favorite. We later watched some Hallmark movies together and teased at the whimsical acting of the characters. Then, as noon closed in, I said my goodbyes. Pursing her feeble lips, she managed to send me off with four flying kisses that I catch and seal into the depths of my heart.

Since no family came to accompany Pari, my Saturday morning visits were her only source of excitement. However, as weeks passed by, Pari grew very pale—her lips chapped, her eye bags sagged more than before, and her eyelids closed yet narrowly opened as soon as I entered her room. She refused to eat her daily morning regimen and grew tired of watching the appealing shows on the T.V. All I could do was sit by her side as time consumed every living breath of her life. Holding her hand, I knew that my presence itself was enough to enkindle solace in her heart.

Barely opening her eyes, she smiled, sending out the last four flying kisses I could ever catch.