The Only Fat Man in Lascahobas

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Georges, the owner of St. Gabriel’s Funeral Enterprise, is the only fat man in Lascahobas. He met us at the gates of the funeral home where David—another U.S.-based physician—and I had come to retrieve the body of one of our patients, Saintilus Joseph. We were greeted with an aggressive hospitality, as if we were traveling executives or investors visiting a new business acquisition. Georges brought out chairs and placed them for us, with a practiced, somber gracefulness, in the shade in front of the chapel. His moist-lipped smile made me suspicious. His well-fed teeth were crooked and strong, still his eyes betrayed real kindness. It was barely 10 o’clock in the morning, but Georges insisted we join him for a drink of rum; he was already drinking. He sent his loud, spoiled young son to fetch a bottle and some ice. The boy feigned drinking from the bottle and worked the crowd for a laugh, stumbling amiably around in the shade. He had the beginning of a pot-belly like his father. In a poor, rural Haitian town, clearly the funeral business was treating them well.

Georges poured a stiff glass of 5-star rum for David and me, and topped off his own. His wife cut a lime and gave us each a slice on a folded paper napkin. We made small talk for some time, which soon turned to a conversation about the funeral business. Georges’ family had funeral homes in several towns and smaller cities throughout Haiti. He had learned the trade from his father in the nearby city of Mirebalais, where he grew up. He enjoyed his work and was proud of the business he had built in Lascahobas.

“Making ends meet can be difficult here in the countryside,” he said. His cigarette bounced between fleshy lips, while his rum glass sweated on the hood of the 1970’s-era Chevrolet hearse he was leaning on. “Many peasants don’t have the money to pay me what it costs to keep their loved ones in the morgue. But I find a way to help everyone I can. There is no one else here.” The sun was getting hotter overhead and my head was swimming. I had my doubts about his generosity.

While I listened to him speak, I thought of how, if I worked in Lascahobas long enough, Georges, too, would become my patient. But he would probably not come to the clinic wasted from tuberculosis or HIV. He would probably not come with the fever and abdominal pain of typhoid, since he has the means to drink clean water. As I listened to Georges speak about the funeral industry in a dying country, smoke curling from his lips, I imagined Georges coming to our
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Sitting among the poor and starving, he would likely suffer diseases more like what I see in my patients in Boston.

Later, Jean Jean, our friend and co-worker from the clinic, told us more about Georges. Jean Jean had worked for him at St. Gabriel’s for several years. Between sometimes horrible and sometimes hilarious stories of riding alongside Georges as they recovered the dead from homes around Lascahobas, he revealed that, in fact, the funeral director was a kind man. While morgue services are a luxury that few can afford in rural Haiti, Georges was fair. It is common in Haiti for the dead to be held indefinitely, sometimes charged by the day for time spent in the morgue, until the family can find the money—depleting their life’s savings, selling valuable livestock or land, or borrowing from usurious money lenders—to reclaim them. Georges charged according to a family’s means, and never kept a body for ransom. Despite his corpulence and obvious success, Georges was a man of principle.

We were invited to tour the funeral home. David and I entered the small chapel. The dim Plexiglas was a poor substitute for the real stained-glass windows, and cast a sad blue light in the room. Dusty paper flowers and streamers hung from the ceiling. They could have been 20 years old, or they might have been hung for a service yesterday. Rows of unmatched folding chairs waited. The green shag carpet, the dim blue light, the stuffy air gave the chapel a subterranean feel. I didn’t want to stay.

Behind the chapel, we entered a work room piled high with cardboard boxes and dominated by a large gray metal cube the size of perhaps four refrigerators stacked on their sides. It looked as if it belonged on a submarine somewhere under the Siberian Sea, not in rural Haiti. Various gauges dominated the front of the box; it was not clear any were working. This was the actual morgue. Georges was visibly proud. Before we had time to think, he threw open the immense loud latch.

“Touch the body,” he said. “Tout mo mwen yo se byen glase yo ye. Pa gen yon lot mog konsa nan tout Plateau Central. All my bodies are well chilled. There is not another morgue like this in all of the Central Plateau.” Glase is the same word to use when describing a cold Coke. There were three cadavers wrapped in plain white sheets, stacked on the bare wire shelves. One was Saintilus Joseph.

Four weeks earlier, we first heard from Pierre Lucienne that Saintilus Joseph was not doing well. He had been in bed for more than a week with diarrhea and had missed several days of his anti-tuberculous medicines.

As an accompagnateur, Pierre Lucienne’s role was to bring daily medicines to several of his neighbors. He watched them take their pills, helping to assure adherence to long and sometimes complex treatment regimens. With these daily
visits, Pierre accompanied Saintilus through his illness. Saintilus had been too weak to walk, Pierre said, so he sent his own donkey to carry Saintilus back home so he could continue to take his pills. All our patients were supposed to receive directly observed therapy in their own homes; clearly something was wrong.

“How long has this been going on?” David asked. Pierre clutched his bible stuffed with directly observed therapy logs at his side, and looked at his knees in silence.

“How many days of medicine has Saintilus missed?” David repeated. Pierre couldn’t say.

“Why did you send your animal to carry Saintilus, if your responsibility is to take the medicine to his house every day?” An awkward silence continued, filling the room.

When David asked the same crucial question again, Pierre finally answered. He began in a low voice, eyes down, speaking softly and in circles. “Saintilus has a house with his wife in our village, but he is never there. He has been staying with another woman across the river. I can’t be chasing him all around to give him his medicines if he’s not at his house,” he said. “I have many other patients and I teach at my own school every day. That’s why I sent the donkey. No one asked me to do that. I did it out of kindness, because I thought it would help.”

David and I went to see Saintilus Joseph at the home of his “other” wife, Marie, the following Saturday. He was terribly weak from dehydration and a high fever. The rattling cough that had first brought him to our care had subsided; it was the only thing that had improved over the past 6 weeks while on—and off—TB medication. We lifted Saintilus’ surprisingly light body into the back of a passing truck, piled high with citron and mangos destined for the markets of Port-au-Prince, many hours away. The smell of fresh limes mixed with the diesel exhaust drowned out the delicate, horrible smell of his fever.

Initially, Saintilus improved in our inpatient ward. His diarrhea resolved quickly, and he was able to take his TB medications. His daughter Jinette was with him continuously, bringing food, washing his clothes and sheets, and buoying up his spirits despite his serious illness. Every night, Jinette slept beside her father on the floor next to his hospital bed. Saintilus also had HIV, diagnosed at the same time his TB was discovered. And though his CD4 count was low, representing significant immune suppression, it was well above the AIDS range and it seemed that he would be able to recover from his tuberculosis without requiring antiretroviral medication for his HIV disease.

But after two weeks, Saintilus Joseph’s condition began to decline. He slept more and more, though he did not complain of any specific symptoms. His fever
returned and, as he slipped closer to coma, his neck slowly began to stiffen. He winced when we moved him in his bed. We treated him with antibiotics against bacterial, fungal, and tuberculous meningitis, to no avail. Marie, their daughter Jinette, David, and I were together with Saintilus when he died. Saintilus’ “real” wife was not able to visit the hospital; she was home in Kolombye caring for five of Saintilus’ nine children. We suspect that he died of tuberculous meningitis, most likely hastened by the interruptions in his TB antibiotics.

Whenever someone dies in our care, the clinic provides money to ease the cost of dying, especially when it is one of our HIV or TB patients. Marie used a portion of this money to buy his coffin, and the rest for a ceremony at their home. This left no money to transport the body, so David and I arranged to move the coffin in the clinic’s truck.

Today, the day of the funeral, we woke early in order to make rounds on our hospital patients. When we arrived back at our house, we found Marie waiting in her best dress and a crisp white hat. Together, we drove across town and picked up the plain, spray-painted coffin from the home of the local craftsman who’d made it. Saintilus was a slight man in life, and his illness had wasted him to just a shell of his former energetic self. Still, the coffin did not fit completely into our Land Cruiser; we had to drive to St. Gabriel’s Funeral Enterprise with the red and grey coffin extending from the back of the truck, the doors tied shut with a piece of rope.

Now David and I waited while Georges’ crew prepared the body. Marie produced a simple grey suit, blue shirt, and leather shoes from a plastic bag. I do not know if Saintilus owned such things during his life; perhaps they were purchased for this occasion. After several minutes, we were invited to view the body. Marie could not bring herself to look, so David and I went in her place. Saintilus Jospeh was thinner in death than he had been in life. His hair was neatly combed and the over-sized suit was perfectly tucked. His skin was like moist ash. His eyes sunk deep into their sockets and collected little shining pools of condensation as his body warmed again in the hot parlor. Marie had not purchased a tie, but Georges was ready with a ragged assortment. I seem to remember he said something to the effect of “it’s on the house” as he held them up for David and me to see. We chose a red tie that we thought would go nicely with Joseph’s shirt and watched in silence as it was tied around his neck. We closed the casket and carried Saintilus to the truck.

We tied the doors behind Saintilus’ coffin and were off. Five minutes down the paved road, we turned left at Kafou Flande toward Kolombye. The path was muddy and deeply rutted by large trucks and the spring rains. I drove slowly,
keeping one eye constantly in the rear view mirror, afraid the casket lid would fly open on some bump or that it might slide out the back door.

We arrived to find a crowd at the Joseph home. A mound of dry earth marked the spot under an orange tree where Saintilus would be buried. In Haiti, families that can afford it place their loved ones in above-ground mausoleums, no matter how simple. A prominent man like Georges would certainly be placed in such a mausoleum, grand enough to represent his large financial—and physical—stature. The thriving funeral business in rural Haiti, where death is a daily reality, would support him even after his own death. Placing the remains above ground is out of respect for the dead, a custom that is part of a native religion that includes ancestors as part of daily life. It is also believed by vodou practitioners that those buried underground can be reclaimed by a powerful boughan and turned into a zombie. I do not know why Saintilus was buried underground. Perhaps his family didn’t believe in such things; perhaps they were just poor.

The funeral ceremony proceeded slowly, suspended in a blur of prayers, songs, and the deep chilling cries of a community not ready to give up one of its own. Joseph’s daughter Jinette, who had stayed with her father until he died, was overcome by grief. She began to dance with a shudder. Her head twisted in a slow, smooth roll, followed by staggering which escalated into spasms of pain or of ecstasy. Her tears began, as the slow dance accelerated, becoming ever more fierce. Jinette, possessed, seemed to travel further and further away from the funeral. I had seen this same dance during vodou ceremonies in Haiti and in the diaspora. Jinette eventually lost balance and fell backward into the waiting, experienced hands of her fellow mourners.

After the service finished and the most violent mourning had quieted, Saintilus’ neighbors carried the casket to the hand-dug hole below his home, then lowered it efficiently into the ground over two large ropes. There was nothing ceremonial about it. Everyone was quiet, without the usual jostling and arguments and loud disputed advice that usually accompanies similar events in Haiti. Someone handed me a shovel. I bent and filled it with the loose red dirt. I slowly pitched one, two, three scoops of earth onto his coffin.

My mind was swimming with thoughts of Jinette, who had filled her father’s hospital room with her kindness and humor and love. She now lay awkwardly on a straw mat in front of her home, arms folded under her, covered with dust and sweat and her tears. Her neighbors still surrounded and protected her. Like those possessed in ceremony, communing with the loa, Jinette was gone: her mind far off, maybe with her god, maybe with the dead. Maybe she was caring for her father one last time.