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"A boy," the doctor informs me. "Most definitely a boy."

I'm lying on a table on my back, feeling the cold jelly spread on my stomach and the transducer moving through it across my bare skin. I twist my neck to catch a glimpse of the screen where the ultrasound projects the child growing inside me in shades of black, white, grey. Something moves on the screen, but the image is indistinguishable.

The news surprises me. I have a daughter and come from a family of four girls; I've been so sure this second child would be a girl. I *want* a girl—how embarrassing to admit. *As long as it's healthy* is all I've said to friends who ask what I want. We have her name: Noa. Or Noah. The name will do for either sex, and we've only recently agreed on it after debating many other possibilities. I let his words settle in, accept them: I'll have a little boy, a brown-eyed, curly-haired son named Noah. He'll run me ragged, the way boys do.

There are two other doctors in the room, gathered around the screen, watching. One makes a joke. "Exhibitionist!" she says. "Look at him, with his legs open." There it is on the screen, she points out, the incontrovertible evidence, a little bud between the legs. But to me, there's just a blur on the screen, nothing I can identify.

They speak to each other, the words flowing easily: *Sixteen weeks' gestation. Single pregnancy. Breech position.* But then, still moving the instrument across my belly, the doctor grows silent. Something's changed. When he talks again, he's giving measurements. *Seven. No, six and a half. In this plane I see it. Seven. It's thick.*

They're not talking to me anymore; it's become a doctors' conversation. They crowd around the screen and talk in serious voices. Something's gone wrong, that's obvious, but they talk in a code that means nothing to me.

As long as it's healthy. How careless I have been with those words, how easily I pronounced them, as if there could be no doubt about the outcome. I try to imagine my little boy in two years, whole, intact, laughing, the new words and phrases, the toddler's circles run through the apartment, then up, down the long hallway to the living room. What are they about to tell me will be missing?

One of the doctors approaches, looks at me, talks. The words float down. *A thickness in the back of the neck. Suspicious proportion of head circumference to femur. Bright bowel. Could be Down Syndrome.*

But they have to finish the procedure, draw the fluid. Only the chromosomes can confirm what they suspect from the screen.

This can't be happening to me. This must be someone else, I think, some hospital melodrama, the sudden hush of their voices, the concern to break it to me gently.

Later I sit in the doctor's office. He tells me there's a fifty per cent chance the lab analysis will confirm what the ultrasound suggested. The extra chromosome in pair 21. Mental retardation. Possible heart and gastrointestinal problems.

But it's not fifty per cent. I can see that in his face. Whatever they have seen on that screen has made the diagnosis clear: Down Syndrome.

On the way out I glance at the T.V. in the waiting area, turned on at high volume. Two women sit on a couch, watching intently, faces registering shock. Something awful has happened. Stretchers, sheets covering dead bodies. Rubble. April 19, 1995. A federal building has been bombed in Oklahoma City. So many victims. A day care center inside. Mothers, fathers have lost their little children.

Disaster.

On the way home I allow a wild hope they're wrong. My thoughts are rambling, incoherent. I remember how, two weeks ago, trying to make the appointment for amniocentesis, I almost decided not to do it, since the Center's hours didn't fit my teaching schedule.

And if I had chosen not to? Would we have first learned of the Down Syndrome at the birth, holding our newborn son, looking down at him? *Downsy around the eyes,* a nurse would say. We'd crowd around him, staring, telling ourselves it couldn't be true. How does a mother feel, discovering that her child has such a handicap? I shudder, imagining myself in that situation, and the response troubles me. Would it be a disaster? There's deep narcissism in my desire to accept only a healthy child with full mental capacity, in this need to see my image of myself in my children. *So smart,* we frequently congratulate ourselves about our two-and-a-half-year-old daughter, Maya. *Precocious. So talkative, so verbal, so advanced.*

Intelligence, health, early independence. These are gifts my parents have given me, gifts that have allowed me a good life, a full life. Gifts I would like to pass on to my own children. Would a child with Down Syndrome have a chance for any of these?

Is the only experience of parenting I accept one of optimal conditions? How could I even expect such a guarantee? But I'm certain I don't want to bring a child with such serious handicaps into the world, certain that if the chromosomes are positive for Down Syndrome, I will not go through with the pregnancy, no matter what negative characteristics I will attribute to myself afterwards. No matter how it will change my view of myself.

I begin to say my farewell.

At home my partner, John, is waiting with Maya. He hasn't imagined any more than I had that I might bring back such bad news. We carry on that evening as if it were any other. We decide to eat out, down the block, at a Mexican restaurant—I'm in a hungry phase and have the urge for thick, salty refried beans. On the surface our lives look no different than they did this morning, but we both carry on in a dazed, fumbling state.

The next day at work I call one of the midwives. I tell her about the ultrasound, the thickness in the neck, the wrong proportion of head circumference to femur, the way the bowels looked too white on the screen.

She is sympathetic but direct. "Those aren't good signs," she says carefully. "Each one by itself is suspicious. Three together, well, be prepared. It doesn't sound good."

I sob, gulp air, talk, all at the same time. She tells me to leave work, go home, rest. "No," I say. "I'll stay." I want to feel normal. Ordinary. Like any other day. I go to the women's bathroom, splash water over my face, try to do something about the redness and swelling around my eyes, before I go teach. A colleague enters the bathroom, sees me crying, stands next to me, touches me lightly on the arm, wanting to help.

"I've had bad news," I tell her, and she stands, offering comfort, wondering what has happened. "Not a tragedy," I tell her, thinking there are many things that could be worse. Those parents in Oklahoma City—how can they live through it? "But bad news." She doesn't even know that I'm pregnant. How would I begin to tell her that I'm going to end it?

At home, I pull a book off Maya's shelf. *A Child Is Born.* Here are the in-utero pictures that amazed me when I was carrying her, so confident, jogging through the sixth month, eating my way through the pregnancy, traveling to Moscow and Brazil.

There's a little fish-eye at six and a half weeks, at eight weeks. Five tiny fingers on the hand at eleven weeks. *In week seventeen,* the books points out, *the nails can be seen.* I stop at that picture and take a good hard look. This is close to what my boy must look like now, growing inside of me, a little thumb on its way into the mouth, a skinny arm, translucent, the index finger already pointing.

I close the book, put it back on Maya's shelf. But I pull down every other baby book we have, go straight for the index. Down Syndrome. I study the pictures, see the familiar features, the eyes, the nose, the flat shape of the head. I read everything, in every book.

The extra chromosome enters into and affects the growth of the body, causing a series of external modifications that are easy to recognize: slanted eyes, malformed ears and abnormalities of the hands. These changes are accompanied by more serious internal abnormalities, often affecting the heart and always affecting intellectual capacity.

Dental problems, poor eyesight and hearing, heart disease, gastrointestinal defects, thyroid dysfunction, early aging, including Alzheimer's disease, higher risk for respiratory illnesses as well as leukemia and other cancers. Average life span now more than twice what it was in the past, 55, once the hurdles of the first two to ten years are surmounted.

A baby with Down Syndrome is often sleepy and may have a poor sucking reflex.

These unusual children, while handicapped, can give parents and siblings a different attitude toward life and insight into its meaning.

Down Syndrome children are generally very sweet and lovable.

But I know these things already. A childhood memory comes back, a family, friends of my family, who had a daughter with Down Syndrome. She suffered through several serious operations and died at twelve. Her parents and sisters were broken by grief.

I know I don't want this, not for the boy who would be Noah. And not for myself, nor John, nor Maya.

I've become a medical complication, and the midwives hand me over to the M.D. He calls to tell me he's spoken with the doctors at the Genetics Center. Eighty per cent probability of Down Syndrome.

"But they told me fifty," I say, sounding desperate, as if we were bargaining over something. Then I feel angry. Couldn't they have told *me* eighty per cent? Yesterday, after the amnio, I sat, dry-eyed, calm, rational, in the office, talking clearly. I asked intelligent questions. Educated questions. I am thirty-six years old. What happened to that thirty per cent they lopped off, supposedly for my benefit, as if I were a child?

The doctor tells me not to go to a clinic. He doesn't trust them. A patient once had a bad experience, ended up with a hysterectomy. He wants me to choose a hospital instead. Then he adds: "But don't do anything until the results come in from the lab, to be sure. Just wait until next week."

"Of course," I tell him. What does he think? That I'll go tomorrow? That I'm eager? That I'm not harboring the hope that the chromosomes will come back normal?

The midwives don't talk to me anymore. Just the doctor, on the phone, with all his advice and non-advice, so vague about where to go, no names of clinics, hospitals, or doctors. He's uncomfortable talking to me and ends our conversations quickly.

"In the hospital," he tells me, "they'll give you prostaglandin. To induce labor."

"Labor?" I ask, holding the telephone away from my mouth, as if it's bitten me. "Labor?" I repeat. "What?"

There's no delicate way to say it: Labor, to deliver the sixteen-week fetus, which won't survive the ordeal.

"Isn't there surgery?" I ask him. "Do I have to go through labor?"

I imagine myself walking in a hospital gown up and down hospital corridors, my abdomen still so small compared to the other women in labor walking there, groaning, hands on sore backs, bulging in the front, their forty weeks almost over. They'll have babies at the end. The hospital staff will put me in a room by myself afterwards, to rest, alone, in funereal silence, away from the women with their smiles and relief and suckling infants.

"I can't go through with that," I tell him. "I want a surgical abortion."

But he repeats that he doesn't want me to go to a clinic. That's the extent of his information. He doesn't perform abortions and doesn't seem to know who does. Since I've decided to end the pregnancy, his part is over and done, his admonition to avoid the clinics the only thing I'll keep with me from the three months I've been his patient. He cuts me off, leaves me on my own to figure out what to do next. With bitterness I realize I should have inquired about his stance towards abortion when first deciding to become his patient. But there isn't time now to dwell on my oversight.

I get names. I call the clinics. The women who answer are friendly, helpful, assure me that they take all the medical precautions, that there are rarely complications. I should be able to carry through another pregnancy in the future. There will be a two-day procedure, though it will not require an overnight stay.

I set up an appointment at the most convenient clinic for next Wednesday, since I'm expecting the final lab results on Tuesday. I tell her that perhaps, just maybe, I'll find out that everything is okay, that I'll be able to cancel.

There's one more thing she wants to talk about.

"There will be other women there, in the waiting room," she says. "You need to know that. Women..." She pauses, looking for the right words. "Women in other circumstances. Women there for other reasons. Not for medical necessity."

I am stunned into silence. Does she really think I wouldn't share a waiting room with those other women? That I am one of those who would sit in judgement? Does she think my ***medical necessity***, the botched chromosomes, would negate what I share with them? The relief? Or that their lack of ***medical necessity*** would take away what they share with me, our sorrow?

She mistakes my silence. "I always have to warn patients about this. It's such a..."

I cut her off. My usual statement about supporting reproductive rights is at the tip of my tongue, as it always is, but I'm not interested in principled statements, too absorbed by my need to arrange things, make appointments, get some modicum of control.

"Stop," I say. "Please stop. Please don't say anything else."

Later, someone passes on the name of a doctor sympathetic to women in my situation. I tell her of the dilemma, that my doctor has told me to go to a hospital, but I prefer a surgical termination.

"There's probably fewer risks doing surgery," she confirms. "If I were in this situation myself, I'd have surgery." But she can't help me. Her hospital has no equipment for a second trimester abortion due to its religious affiliation.

In the midst of sorrow, I am angry. I feel alone and abandoned by the medical professionals who should be helping me make arrangements. They've encouraged me to have ultrasounds and genetic counseling and amniocentesis, but now falter and judge me for the decision I've made on the basis of the information all their advanced technology has yielded.

Maya and I are walking home. We've been enjoying the April afternoon, the spring sunlight, the warmth. We're not talking. She's absorbed in her world, humming, examining sticks and leaves and cracks in the sidewalk; I'm wondering whether or not I should cancel the talk I'm supposed to give next week at the College about a conference I recently attended in Cuba. Will it help me to go on with everyday life? Or should I take some time off, stay home with Maya, enjoy her company?

"Deborah," she asks suddenly, interrupting her own song, "do you have a baby in your tummy?" She knows about the pregnancy, but asks about it every day, wanting this regular confirmation.

"No," I say, to see what the word feels like on my tongue. I should wait to tell her this; perhaps things will work out, and how would I explain that? A disappearance, reappearance? She'll get confused. And anyhow, I am still pregnant. It's too much of an untruth to say *no* so flatly.

But I say it again, very clearly, firmly, my voice even.

"No."

She doesn't say anything, returns to her examination of winter-browned lawns, a woman painting the slats of her porch railing, the front steps of our neighborhood YMCA. We walk another block without talking. But my daughter is persistent. At two-and-a-half she already wants to get to the bottom of things.

"What happened?" she asks. "Did it go down the drain?"

The image knocks me back into silence. How does she come up with things like that? Then I say *yes*.

I go to the College; I try to teach. We go to some friends' house for dinner Friday night, as if things were normal. They're good friends, but

there are beliefs that divide us. Carol, Christian humanist, doesn't believe in testing, and certainly not in ending a pregnancy. She registers the news with deep sympathy, accepts my decision, but it's clear she would make a different choice. "I've said to myself at times that if I had to have a handicapped child, I would want it to be one with Down Syndrome," she tells me. I admire her belief that she should accept whatever child a pregnancy might bring, no matter the problem, but I don't share it.

On Monday, driving to my morning class through a dreary early-spring rain, I feel an exhaustion so deep I can't drive any further. I want to sleep. I pull over into a gas station, lay my head on the steering wheel and doze for a few minutes.

Awake again, I call my department's office to cancel class. Laura, the office administrator, hears something in my voice. "Are you okay?" she asks. I'm calling from a car phone, filled with static.

"No," I say. "I'm not." I'm stuck in the middle of this awful commute through strip mall suburbia, yawning, dozing, wondering how I'll drive the car safely back home. Coffee won't help. I haven't been able to tolerate even the smell of it since I've been pregnant.

I'd do anything to get somebody to come and drive me home. I'd like to sleep for weeks.

Somehow I make it home, sleep, get dressed, eat, then decide to head back for my last class. The rain is worse now, the College particularly empty on this dreary late afternoon. Laura sees me and looks concerned.

Laura has five children, fourteen and up. I know about the one she lost at three days, after a difficult, bed-ridden pregnancy and hard labor, the baby she still mourns so many years later. I can't tell her what I've learned about my pregnancy without crying, and she opens her arms to me. I lean against her and she hugs me, says nothing, just strokes my back.

I know she's Catholic and wouldn't do what I'm going to do, but she understands what I'm feeling. I stand, face nestled against her chest, feel her mother-arms around me.

I've been in my office ten minutes, door closed, preparing for class. There's an insistent knock at the door. The Associate Dean stands there. She, too, hugs me, her face registering surprise and sadness. "Laura told me," she says. "I'm so sorry."

I start to cry. The slightest gesture, the smallest touch, any expression of sympathy starts the tears again.

"You're making the right decision," she says. "Don't have any doubts."

She doesn't realize that I don't.

"I have a friend whose boy has Down Syndrome. He was born with a hole in his heart. He's had so many operations, so much pain."

Then, abruptly, she goes on. "I know you're not asking for any advice,"she says, "but I'm going to say this anyhow. Listen. You know how people are around here."

Very Republican. Very Conservative. Many Fundamentalist Christians. Our first interaction as new Dean and new faculty member was over a student upset by the reading materials I use in my composition class.

"If I were you, I'd keep this quiet."

Tell people I lost the pregnancy, she means. Not that I have chosen to end it. And never use the word *abortion* here.

Deny it, she's telling me, as if I were about to commit a shameful act rather than one born out of the deepest sadness.

It's Tuesday afternoon. I'm in my office. Classes are over for the day, and I'm grading papers. Something near my stomach flutters. Can it be? Isn't it too early, just short of seventeen weeks, to feel movement? But there it is again, the slightest sensation of a brush stroke, and I can't help but smile, remembering the moment when I first felt Maya and imagined her not as a human-in-formation but as a little fish, a shining, graceful goldfish swimming, fins and long tail dragging behind, brushing against the inner walls of my stomach. She grew. The flutters gave way to other sensations, kicks, elbowings. Lying on my back I watched her move from side to side, my stomach rising and falling as she curled, uncurled, accommodated herself.

I sit back in my chair and remember this and wait, eyes closed, smile on my face, waiting for another flutter, pretending for just a few minutes that this is still the beginning, that this little creature will grow and flourish, and I'll spend the summer watching myself expand, huge belly, with a child inside kicking, turning, wanting out. How delicious this process, how greedy I am for it, how hungry, how thirsty. Little boy child, how much I wanted you! How sorry I am, sorry, sorry, sorry.

How much I wanted you.

Wanted. But now I don't. Not the way you would be. This is the truth: I don't want you the way you would be.

Who am I to pick and choose? How much should a mother decide?

On the way home, through the long drive in heavy traffic, the words form on my lips of their own accord and I must pronounce them: Forgive me.

I say this over and over again. Forgive me.

Tuesday evening. Maya and I are home by ourselves, John somewhere unavailable by phone, when I get the call. I know even before I pick it up that it's the doctor.

"The results are in," he says, "they just called me from Genetics. Positive. Every cell they examined shows it. Down Syndrome."

There's no drama in the words I have been expecting for a week. I keep playing with Maya, spreading out cards on the floor, looking at colorful pictures of sailboats and clowns with smiling faces. The moment feels hollow. Empty. Too quiet.

A counselor at the Genetics Center saves me. It simply isn't true that the surgery is done only in clinics. She makes the calls for me, arranges for the best care one can get, at a prestigious hospital, first-class physician. The best a decent insurance plan can buy. As in the clinics, it's a two-day procedure. They'll start it Thursday; I'll go home, and then finish on Friday. One day of rest, and it will all be over.

Wednesday night, late, I step quietly into Maya's room. My eyes take a second to adjust to the darkness. I hear her breathing, a little raspy through the nose, the rhythms of her deep sleep. I look around the room at her toys, her books, the changing table cluttered with clothes. I bend over my daughter to plant the customary kiss and say the last good-night. She usually stirs when I kiss her this way, but never wakes up. This time I don't stand up after the kiss. I linger, taking in her smell, the slight dampness of perspiration behind her ears. I kneel beside her and wait, though I don't know for what. She sleeps, unaware of my presence, oblivious to what will happen tomorrow, what she will lose, what she will gain.

Thursday, after leaving Maya at day care, I go to the hospital for the first part of the procedure. At registration, I hand my referral from the Genetics Center to the woman taking my information for insurance purposes.

She reads the doctor's request: *Dilation and Evacuation.* Her eyebrows go up and she stares at me.

"Your insurance is going to pay for *this?*" she asks.

I can't talk, start crying. Only then does she read further and see the diagnosis: *Down Syndrome.* She's instantly apologetic, or at least appears to be.

She keeps talking, making everything even worse. She talks about God now, awkwardly, trying to reassure me I've got His blessings, that this must be His Will. She can't imagine that I don't believe in any god, that I'll have to make peace with myself over this aborted pregnancy, that I'll have to make sense of my own decision to end it, will have to struggle with myself to understand what it means about me as a person, a parent, a mother. Not with god.

And there is no turning back. Upstairs, in Outpatient Surgery, in an examination room, a resident tells me he is sorry for what has happened and what I am going through. He is younger than I, matter-of-fact, no trace of judgement, has a kind of sympathy that appeals to me, direct, clean, no sloppy sentimental edge. No explanations wanted. He will put laminaria—thin sticks from a sea plant—inside the cervix to start the process of dilation. In an hour, I'll be free to go home.

Tomorrow, he says, they will "remove the products of conception." Even here, everyone avoids the word abortion.

This is it. No retreat.

Terrible images. Sleepy creature curled up inside me, warm, comfortable, unsuspecting. I was to nurture him into life, but now I have planned his demise. Innocent thing, he sleeps on. By this time tomorrow this little life inside me won't exist anymore.

Later I drive the Eisenhower Expressway out to the College, stopping for a hearty lunch along the way, with the appetite of a pregnant woman past the first trimester—pasta at Giordano's, salad, bread. I butter the bread, sop up the marinara sauce with a dry spot of crust, clean my plate. A week ago, before I knew, eating like this seemed necessary. Grow, child!

Afterwards I feel heartburn.

I'm talking about Cuba to a small group that has gathered for a brown bag lunch. Talking, talking, talking. A mouth moving on its own, unconnected to anything. *The Cuban educators talk about 'cubanidad,' the sense of being Cuban, of belonging to their country, its culture, traditions, language. They wonder what can they offer students other than a sense of a homeland with a vibrant, unique culture, with all the things Cuba has given the world, the music, the poetry, the example of a small developing country defying the will of a world power. When just across the Straits of Florida is a country rich with all the things they can't have in Cuba, will never have in Cuba, the abundant food, the color televisions, computers, videos, flashy clothes. All the things that symbolize global youth culture. What is powerful enough to make the young people of Cuba stop wanting all that? What can they offer their students instead, these teenagers who come from a country that will always be poor? Cubanidad. Perhaps that's all they have.*

I look out at the faces, most of whom I know. I'd like to appear poised, interesting; I'd like to present to them the dilemma this thinking poses for me as a progressive educator in the States, where one of my goals is to question the notion of a homogeneous American identity, where I view any form of American nationalism negatively.

None of those faces has any idea that I am in the middle of ending a pregnancy. How astounding that I have dragged myself out here to do this. I could have easily canceled. What compelled me to give this talk?

There is a life out there beyond you, I tell myself, remembering that small, short glimpse I had of a country trying to figure out what to do next, how to remain Cuban while struggling to get beyond the current impasse.

But I can't get beyond myself. I remember that it was in Cuba that I first suspected I was pregnant, at the same time that I developed a severe case of laryngitis and couldn't speak. I went to see a doctor, a young woman, who complained bitterly about not being able to go visit relatives in Venezuela because she couldn't get a visa to go abroad, as if she wouldn't return. "Of course I'd return," she said, looking at my throat with a tongue depressor, instructing me to open wider, clucking at what she saw in there. "*Faringitis,*" she pronounced. Pharyngitis, something I didn't even know existed.

"I think I'm pregnant," I told her, worried about the prescription she was writing. I hadn't told this to anyone yet.

She looked up. "Do you want to keep it?" I nodded. She insisted her prescription wouldn't harm the pregnancy in any way. But I wouldn't take the medicine, not knowing precisely what it was, and the Cuban delegates to the conference, not suspecting my reason, couldn't understand why I was being so stubborn about it.

And all the *mojitos* I said no to. A little delicacy in the midst of such scarcity, rum, fresh mint, sugar, ice, and a pleasant mid-afternoon buzz that first day in Pinar del Rio, before I realized I was pregnant. And then no more after that. Prim gringa teetotaler, I turned down this generous offer made to us so often during our week stay. I rewarded my abstention with the idea of a boy I might name Camilo, still a popular choice for Cuban boys, named for Camilo Cienfuegos, hero of the Revolution, *porque el andaba conmigo en Cuba*, I would tell everybody. He was with me in Cuba.

After my talk is over, the questions asked, my answers given, there is nothing left to distract me. The rest of the afternoon seems impossible. Two colleagues—good friends—ask me to join them for lunch. Though I've eaten already, their invitation is an escape from the hours ahead of me.

We drive to a restaurant, order our food. They know I'm pregnant. There's Kathy, whose boy is just over a year old. She spent most of her pregnancy in bed, getting tested and retested, and finally having the baby two months early. *A life-threatening pregnancy* she called it once. *I was lucky*. And Gwenna, who decided years ago that she doesn't want children. I tell them that I'm in the middle of ending the pregnancy. I tell them why.

To anyone watching us, we're just three women sitting in the bar of a restaurant, eating, talking, an obvious collegial camaraderie between us. It's comforting to think that on the surface, it looks like this is just any other day. I don't want the lunch to end. I want to hang on to this brief feeling of life undisturbed.

Friday morning. We must go early to the hospital. Following orders, I've had nothing to eat or drink since midnight. Normally this would be only a minor discomfort, but eating actually settles the acid stomach I've felt constantly for almost four months. There's a greasy pit at the bottom of my stomach, pregnancy imposing itself even as I go to end it.

I'm in a messy state, barely washed or combed, no make-up, dressed in loose, thick unflattering clothes. "I guess I don't have to dress up for this," I try to joke with John, but of course it's not funny.

We leave Maya, unsuspecting, at day care, then drive on.

There's a needle stuck deep into a vein in my hand, IV pole attached dripping something into my arm; I'm dressed in hospital gown, cap and slippers. A nurse calls me to the operating room.

My turn.

They let me walk and I wonder how I can. I feel each reluctant, frightened movement of my feet separately, as if I were being summoned in slow motion to my own execution. With each clumsy, slippered shuffle, I wonder where I find the impetus to move forward. How long will it take? Will I be in pain? Will enough care be taken? Will the operation ruin my chances for ever having a second child?

Second child?

The operating room is cold, stainless steel. People in masks move around, preparing things. There's a table for me to lie on. Huge clock on the wall. Machines. Trays of instruments. Why so many people? Such a narrow table. They're going to drug me.

On the floor, underneath one end of the operating table, there is a large, stainless steel basin. There's no getting around it: I'm here to do something awful. This little creature still nestled inside of me, whom I was to have brought into the world, who was to have been my son, will end up in a basin below the operating table, torn and bloodied, at my feet.

Someone helps me onto the table.

Then I float away into a Valium haze. The last thing I am aware of is the simple terror of being on an operating table, the helplessness of having my limbs feel as if they are dissolving, my head melting, my body drifting from me. Terror. They could do anything they wanted to me now.

At some point during the operation, emerging for a moment from the sedative, I open my eyes. The only thing I can make out is the clock on the wall, the second hand sweeping around the black numbers. I ask what time it is. It's an absurd question, but I just want to hear my voice. Just want to feel that I'm still here. I can see the clock, but I can't focus enough to tell time.

Afterwards, in Recovery, I follow more orders. I drink juice, eat crackers, fight off nausea. The drugs wear off; my head starts to clear. I look down at my body in the hospital gown. My abdomen is still thick and fleshy from a pregnancy that exists no more.

It is over; it is irrevocable. It has become a fact of my history: a second trimester abortion, the end of the possibilities for a boy who would have been son, brother, grandson, nephew, cousin. The end of a family we could have become but chose not to, the family of Noah, the boy with Down Syndrome, the special needs child, the child in need of hospitalizations and operations, the gentle, slow, loving child, struggling, always, for his health, for his bit of independent life.

A nurse approaches, paperwork in hand to release me and send me home. She advises me to bind my breasts tightly as soon as I get home, to keep the milk from coming, to trick my body, which thinks that since pregnancy is over, it's time to nurse. I'm too dazed to cry but my eyes fill with tears at this warning.

Now what? I wonder. But it's time to pick up Maya at day care, go home and get on with our lives.

I see people with Down Syndrome around me all the time now. I don't think I noticed them before. A boy, around thirteen, walking through the park near my house, unaccompanied. He's on his own; he's making it out in the world, at least enough to take a neighborhood stroll by himself. I follow him halfway through the park, mesmerized, deviating from my own intended path.

At the college, there's a group of adults from a nearby Center for the Handicapped, taking their charges for noon walks around the outdoor track. I jog past them, huffing, staring, feeling my throat constrict. A young, overweight woman with Down Syndrome, enjoying a sunny autumn day. A teenage boy with cerebral palsy, scarcely able to look up, being led by one of the Center workers. I'd like to view the workers as saints, somehow better than I, devoting their time to helping handicapped people enjoy fuller lives, but truthfully, they just look like people doing a job, people at work, so matter-of-fact, chatting with each other as they walk with their patients.

At the supermarket I see a little boy with Down Syndrome shopping with his parents. He does what all two-year-olds do, runs through the aisles, grabs everything, gives his parents a good chase.

He's so cute, the toddling walk, the shrieks of delight, the little overalls, the laughter, an adorable child. His father grabs him just in time to keep him from turning over a shelf in the dairy section. Something pulls me towards that family; I feel, for a moment, the complicity of shared experience. But in fact I am probably the last person with whom these parents would feel any complicity. The last person at whom they might smile.

Then, only fifteen minutes later, in the checkout line, I see another child with Down Syndrome, this one at least fourteen years old. His mother, somewhere in her fifties, is loading groceries onto the conveyor belt and has turned her back to her son. He wants to play, surprises her from behind, jumping on her, knocking her forward into the cart. The unanticipated attack from behind startles her. Turning, she sees that it is her son, and in that one short instant I see so many conflicting emotions on her face. Surprise and fright, from the sudden pushing and jarring, followed by annoyance, when she sees that it is her son who has pushed her, that his behavior is simply not appropriate for someone as big as he. Then resignation, acceptance, and finally a weary smile at him. Her son is all affection and playfulness; he had no intention of disturbing her. Perhaps she faces this resignation every day.

I shouldn't have seen this moment between them; I shouldn't have scrutinized them so carefully.

I see myself in all these families. I see what my own family might have been.

At the public pool in the summer there's another teenager with Down Syndrome. Every time I take Maya for a swim, he's there. Sometimes he's in the kid's pool, playing with the plastic buckets and floating animals, improvising a water gun from somebody's snorkeling mask, squirting anybody and everybody. He squirts me and I try to smile at him, laugh, but I can't and I slowly make my way to another corner of the pool, feeling shaken. I hope his parents haven't seen me back away from him. Later, in the large pool, I see the same boy with his parents, the three of them hugging each other and playing in the water, their arms encircling each other. They're standing like a little

island, a self-protecting lump of land in the middle of the crowded blue pool, jumping and playing and laughing together. I stare and stare, swim close, watch, observe them. I wonder about his health, his life expectancy. How soon might they lose him? I feel cold and unloving, a passionless observer of this family's happiness, wondering what cracks I might find in the facade. But then I'm engulfed by a wave of feeling for the boy. Isn't he a full human being, a full life? There's such an obvious joy in his being, in his presence. And he looks beautiful to me, his playfulness, his humor, his flat Down Syndrome features.

I know what I'm doing, standing chest-deep in water, feet rooted someplace to the bottom of the pool, staring, overwhelmed by this seesaw of emotions: I'm pretending I'm his mother.

I would love him as any mother loves her boy. As I would have loved the boy who would have been Noah. I'm sure of this. But I'm equally sure that I didn't want him.

I carry such a secret inside of me now. I couldn't tell this story to any of these parents. I don't even know why I want to, what the pull towards them is. I'd like their experience to confirm my own decision, but it doesn't.

Get into a support group. That's the advice I get. I imagine that everyone who has undergone any kind of trauma is told just that: go to a support group, meet people who have undergone the same trauma, the ones who are supposed to understand. And so I'm given the name of the support group for parents who conceived children with chromosomal problems—there are many of them besides Down Syndrome—and then aborted the pregnancy. The group meets in a hospital in a suburb quite distant from where I live, even further from where I work. I could drive for two hours to attend, and plan to do so, but meetings are held only one Thursday evening a month and for the next two months I will be out of town precisely on those nights.

For weeks I am haunted by images of a fetus—my fetus—being torn to pieces. The woman who gave me the name of the support group, a therapist herself, tells me that she thinks going to the group will help me get over the images. That they're normal. That what I've gone through isn't easy.

By the time I could actually attend the support group, three months have gone by. I'm calmer, not drawn to the idea of a group of people getting together to talk about a pregnancy that didn't work out. I'll have to get through it on my own, I decide.

I've joined a kind of secret society, though I don't realize it yet.

When people find out what's happened to me, since I must explain to those who knew I was pregnant, I start hearing the whispered stories:

M. became gravely ill during her second pregnancy and needed repeated x-rays to her abdominal area to determine what the problem was. With so much damaging radiation inside of her, she was advised to terminate the pregnancy, somewhere in the second trimester. Later she did have her second child. Her kids are in high school and college now. Who would ever know what happened between their births?

When S. was pregnant with what would have been her second child, she and her husband, after much testing and worry, were finally told that their older child's problem was autism. Knowing of a strong genetic basis for autism, they decided not to risk a second pregnancy.

And G. had the same story as I. Amniocentesis revealed Down Syndrome; in week sixteen she ended the pregnancy. But it was her first pregnancy, and it had taken her two years to conceive. Now, years later, she has two healthy children. One would not know that her delight with her daughters carries with it the sadness of that first pregnancy. That is, she would never have revealed it to me, as she rarely talks about it, had I not had the same experience.

Even a friend from Cuba writes: *I know how you're feeling. Something very similar happened to me and my companion.*

I never realized how many people I know have had the same bad luck. Never realized before how many people walk around with these kinds of painful secrets.

This secrecy, this shroud of shame, is damaging. I ended a

pregnancy in the seventeenth week, but I can say this only in a hushed, confessional tone, tell the story only to the appropriate people, those who have faced similar situations.

But is this only a private matter? I am silent, but at least several times a day on the drive to work or in the College parking lot I see one of the assortment of popular slogans on bumper stickers. *An abortion stops a beating heart. It's a child, not a choice.* Those words are directed at me, since by bad luck and by choice I have become personally involved in a larger polemic.

I imagine stopping the drivers, shaking my head, perplexed, asking them, *would you really want to make this decision for me? For my family? How do you think you could? You don't even know me.*

The secrecy is damaging, to all of us. And so I am telling this story.

I have a second child now, a smiling, healthy eight-month-old boy. He's getting teeth, getting restless as he discovers his new powers, crawling, pulling himself up onto our bed to peer over the quilt's red and white designs towards the window. Every day he learns something new. How to use his two teeth, still only half emerged, to chew. How to slither slowly on his belly on the very edge of our bed to approach the night table, careful so he won't fall, how to position himself to grab the alarm clock whose bright red digits fascinate him. Watching the world fills him with joy—any detail makes him chuckle, the slow revolution of the ceiling fan, the green and red flashes of traffic lights when he's in the car, the first glimpse of his sister in the morning.

What words to describe the pleasure of holding him, feeling the warm cushion of his body, smelling his smell of milk, of me, of him?

Who would know, seeing our family, what we gave up between the births of our two children? My son's being, his health, his big brown eyes and their astonishment at the world he's discovering, his entire lovely existence, are connected to this secret: his presence, the richness he has brought to our lives, came about through the absence of another.

This story's sad ending was my choice. I cannot and would not change that ending, though making that choice has so surely changed me. But in a way it's not over. I can't and don't want to forget what happened, don't want to forget the boy who would have been but who isn't, whose non-memory is with me. I will never know who that boy would have become, what kind of life with Down Syndrome he would have had, what our lives with him might have been. I will never know what, as a family, we might have gained and might have lost by his presence. But I do know more now than I did then about the dilemma and heartaches of being a mother or choosing not to be. I know that the loss was not only an ending, but also the beginning of a permanent hollow, a small tinge of sadness I'll keep with me always, together with my many joys.