My Brother

Jamaica Kincaid

After I saw my brother that first time and returned to the place I was staying, the place that was not my mother's house, I went to the manageress and said, "I need a drink." I have heard people say just that before, "I need a drink," but I thought it was a figure of speech, I had never needed a drink or any other kind of mood alterer before; I have taken moodaltering substances many times, but I never felt I needed them. I drank five rum-and-Cokes. I do not like the taste of rum, really, but I drank five of these drinks all the same and could have drunk more than five but did not. The manageress, a very nice woman, sat next to me and we struck up a conversation; I told her my brother was sick and in the hospital, and when she asked me the cause of his illness I told her he had AIDS. This disease, in Antigua, produces all the prejudices in people that it produces elsewhere, and so like many other places, the people afflicted with it and their families are ashamed to make their suffering known. It was for my own peace of mind that I said it; I wanted it to be real to me, that my brother was suffering and dying from AIDS; hearing that he was sick and dying was new to me and so every opportunity I got I would say it out loud: "My brother is sick from and dying of AIDS." But my announcing to this woman led to something. She told me of a doctor in Antigua who she said was always on the radio or television talking about the danger of AIDS, how it could be contracted and how to avoid contracting it. He was considered the leading authority in Antigua in regard to this disease (though in fact he was the only doctor in Antigua who was publicly involved with this disease). She said his name was Dr. Ramsey. The next day I looked him up in the telephone book and called him.

The reason my brother was dying of AIDS at the time I saw him is that in Antigua if you are diagnosed with the HIV virus you are considered to be dying; the drugs used for slowing the progress of the virus are not available there; public concern, obsession with the treatment and care of members of the AIDS-suffering community, does not exist. There are only the people suffering from AIDS, and then the people who are not suffering from AIDS. It is felt in general, so I am told, that since there is no cure for AIDS it is useless to spend money on a medicine that will only slow the progress of the disease; the afflicted will die no matter what; there are limited resources to be spent on health care and these should be spent where they will do some good, not where it is known that the outcome is death. This was the reason why there was no AZT in the hospital; but even if a doctor had wanted to write a prescription for AZT for a patient, that prescription could not be filled at a chemist's; there was no AZT on the island, it was too expensive to be stocked, most people suffering from the disease could not afford to buy this medicine; most people suffering from the disease are poor or young, not too far away from being children; in a society like the one I am from, being a child is one of the definitions of vulnerability and powerlessness.

When I called Dr. Ramsey I asked him if he would meet me at the hospital and examine my brother and give us, his family, medical advice, as to what we could do, what we could not do, what we could expect and, perhaps, when to expect it. He agreed to meet me and at the time he said he would arrive, he arrived. I only mention this because in Antigua people never arrive when they say they will; they never do what they say they will do. He was something I had long ago thought impossible to find in an Antiguan with authority: he was kind, he was loving toward people who needed him, people who were less powerful than he; he was respectful. He greeted my brother as if they were old friends; he spoke to him of cricket, of calypso, and of a trip he had taken to Trinidad to celebrate the carnival there. He examined my brother with his bare hands, he felt his neck, he listened to his breathing through a stethoscope, he looked in my brother's mouth, at his throat, and he made me look at the large ulcer that was near his tonsils. After he was done, he sat and talked to my brother some more; he spoke to him in broken English; I could not understand what they were saying, they spoke very fast, it was the most animated I had seen my brother since I first saw him lying there dying. He even laughed out loud at something Dr. Ramsey said, something I did not understand.

Afterward Dr. Ramsey told me that since my brother did not yet have diarrhea, one of the symptoms common to AIDS sufferers in the Caribbean, there was a chance that AZT could slow the progress of the disease and allow my brother to live longer than we thought; certainly it would alleviate some of his immediate suffering. When I had heard about my brother, I asked my mother with what medicines he was being treated and she said they were giving him something for pneumonia and something else for thrush, medicines a doctor at the hospital had given her a prescription for and she had gone to a pharmacy in town and purchased. These medicines common in the treatment of AIDS-related illnesses are not kept in the hospital; people who are not infected with the virus that causes AIDS do not get an extreme case of thrush, do not get a terrible kind of pneumonia, and so the medicines that would treat these afflictions are not on hand at the hospital. But then this: one night my brother had a terrible headache and needed something to ease the pain; there was no aspirin on the ward where he was staying and no aspirin in the dispensary. A nurse on duty had some in her purse for her own personal use and she gave my brother two of them. There are people who complain that a hospital in the United States will charge six dollars for a dose of Tylenol; they might wish to look at this way of running a hospital: bring your own medicines.

When my mother told me AZT could not be obtained in Antigua, I called someone I know, a friend who is a doctor, and I asked her if she would write a prescription for a month's worth. She said yes immediately, and said she would give me more if it was necessary. I was used to this sort of kindness. I did not know then if even a month's worth would be of any use to him. She gave me a prescription for a more powerful drug than the one he was taking to treat the pneumonia he had and a more powerful drug than the thrush had made it so difficult for him to swallow anything that the pills had to be crushed before he could swallow them.

After he saw my brother, Dr. Ramsey told me that, with one exception, he had not seen anyone over the age of thirty-two suffering from AIDS. The exception was a man sixty-six years of age. He said that in August one year, in a two-week period, seven people, young people, all under thirty-two, had died of the disease. As far as he could tell, the people who died did not know each other. He said that people who are not HIV-positive give up too soon on the people who are, but that he tries to keep everybody alive, because you never know when a cure might come along. He said that-you never knew when a cure might come along-and I could not tell if, in that, he was asserting native Antiguan foolishness or faith in science. Antigua is a place in which faith undermines the concrete. He said my brother did not look too bad, he had seen people who looked worse; what he meant of course is he had seen people who were on the verge of dying, and by the time he saw them, it was too late to do anything. But what could he do, I wanted to ask him, if there was no medicine available, if the people suffering did not have a sister who lived in the United States and this sister could call up a doctor who would write a prescription for some medication that might be of help, what would happen then? He is a very loving man and the other reason I have for saying this is I saw that wherever he went, people, ordinary people, would go out of their way to greet him and ask him how he was, but not because they really wanted to know; it was just to hear his voice.

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