

The Spirit Catches You and You Fall Down Study Guide

The Spirit Catches You and You Fall Down by Anne Fadiman

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Plot Summary

The Spirit Catches You and You Fall Down is the story of a Hmong Family, the Lees, their journey to America, and their struggles following their immigration. The Lee family were political refugees fleeing their home country of Laos in response to the "Silent War" and the subsequent loss of livelihood and starvation its inhabitants faced. The parents, Foua (mother) and Nao Kao (father), traveled through rough terrain and literally dodged the bullets of political enemies to bring their twelve children to safety in a refugee camp. While at the refugee camp, Foua delivered their thirteenth child. They were then relocated to California, a place chosen not by the family but by the US immigration officials who were trying to evenly spread the great number of immigrants across the country. While in America, Foua delivered their fourteenth child, Lia.

Unlike all of her previous births, which occurred at home in a peaceful setting, Lia's birth occurred at Merced Community Medical Center (MCMC), because that was what the Lees mistakenly believed was necessary to obtain citizenship for their daughter. At her birth, Lia appeared to be a healthy, eight pound seven ounce girl and the delivery was uncomplicated. However, in infancy, Lia was diagnosed with what American doctors called epilepsy, a physical disease of the nervous system. In the Hmong culture, seizures were believed to occur in a spiritual realm and symbolized a condition deserving of reverence. According to their beliefs, Foua and Nao Kao thought that a spirit known as a dab had captured Lia's spirit and wouldn't return it. Their difference in belief systems as well as the language barrier prevented proper communication between the Lee family and their physicians. Over time, the doctors became exasperated and at times apathetic. The Lees also complained of feelings of frustration, as well as being misunderstood and blaming the doctors for intervening in ways that appeared to make Lia more sick instead of better. In a final insult, the doctors recommended Lia be removed from her parents' home and placed in foster care because her parents were unable to read the English directions on her prescription bottles and Lia was not taking her anti-seizure medication according to the prescribed schedule.

Lia continued to suffer from seizures, which became worse in nature. After years of uncontrollable seizures, Lia regressed. She lost her ability to speak and interact with people. An especially bad episode of seizures rendered her brain-dead and paralyzed. The book delves into the question of who was to blame—the doctors who could possibly have saved her with their western medicine but didn't, or her parents who were unable to understand the doctors' directions. The book examines this issue but makes no conclusion. Instead, it uses Lia's case as a study in anthropology and makes an argument for the inclusion of cross-cultural training and empathy in medical school as well as increased presence of interpreters and social workers in medical settings.

Preface

Preface Summary and Analysis

Anne Fadiman discusses her relationship with the Lee family in the preface. She offers her esteemed insight into what went astray with Lia Lee's care in the American medical system. Anne recorded her conversations with the Lees. Her interviews were conducted through an interpreter and offer a glimpse into Hmong culture. If one concentrates on the voices and ignores the ample background noise—babies, television, noisy relatives—the listener can differentiate the eight tones of the Hmong language. In contrast, Anne has also kept another set of tapes. These are of her interviews with the physicians who cared for Lia. The Lee family arrived in America in 1980, but it wasn't until 1988 that Anne first met them. At that time, Anne traveled to Merced, California to learn more about the cultural collision she had heard rumors of. While Anne was comfortable in American society, she learned to become equally at ease on the red folding chair, the honored guest's position, where she sat during her time in the Lee's apartment. During their time together, Anne learned to appreciate the Hmong culture and the Lee's parenting. She wondered if it was impossible to meld the American medical system and the Hmong culture in a way such that culture could be respected and western medicine successfully applied.



Chapter 1

Chapter 1 Summary and Analysis

In Hmong tradition, Foua Lee delivered her first twelve children in a squatting position on the floor of her own home, which had been built by her husband with native materials. Her births were quiet, uncomplicated, and private (private meaning not attended by a care provider, but she was not alone—she was usually surrounded by her other sleeping children). The Lee family were fortunate to have healthy children, but in the event of an illness the Hmong tribe utilized the powers of a txiv neeb. A txiv neeb was a shaman believed to fly long distances on a winged horse in a trance-like state. He would travel to locate lost souls and retrieve them on behalf of family members. Souls were believed to be detained by a spirit called a dab, and dabs were lurking everywhere, awaiting opportunities to snatch souls. Following a healthy birth, the father cut the umbilical cord and buried the placenta beneath the family home. The placenta was believed to be a child's first jacket. Upon death, the soul must travel back through time to locate its burial jacket for the journey into afterlife. In this way, Hmong families are ensured the sacred honor of the presence of their elders.

The Lees homeland, Laos, became a battleground for communist forces in 1975, and the Lees fled in response to the war. When they left their home and the placentas beneath it, they sentenced their family members to eternal wandering. Six of the Lee children died before the family immigrated to America. They found refuge among two different camps in Thailand, then were flown to Hawaii and Oregon, where they lived before resettling in California, thus making for a very long journey for the souls of their family members. Foua delivered her thirteenth baby in a Thai refugee camp, and her fourteenth baby, Lia, in America. Foua spoke no English and her physicians were not familiar with her language, so the rituals of her ancestors were not followed and she had no way to inquire after the placenta of her child.

Lia appeared healthy at birth and Foua labored easily. The Gregorian calendar used in America places Lia's birth as July 19, 1982. The obstetrical chart is less clear, however. Hmong culture does not utilize the Gregorian calendar—it doesn't apply to their way of life. Foua's exact age was unknown, but her birth was noted as having occurred in either October of 1942 or 1946. Foua was sure only of the month of October. October corresponded to the agricultural calendar to which she was accustomed (her parents said she was born during the month when the opium was weeded for the second time). The obstetrical chart closes with a paper that Foua signed, confirming that she checked her baby and her baby's medical bands and confirmed that the child belonged to her, an impossibility since she neither read English nor recognized Arabic numerals. Three days after the birth, the Lee family brought Foua and Lia home to their apartment. Lia was officially welcomed into her tribe at her name calling ceremony at one month of age. In order to understand what happened next and all of the incidents at the hospital regarding Lia's care, the author feels one must understand the history of the Hmong people.



Chapter 2

Chapter 2 Summary and Analysis

The culture and fate of the Hmong people is seeped in years of tradition. Their current state is impossible to separate from their past. When asking a Hmong a question, it is likely that the answer will include information about their ancestors. While this may seem irrelevant to the listener, the information has bearing when one considers the perspective of the speaker. This is exemplified in the English translation of a Hmong phrase meaning "to speak of all kinds of things". Thus, in the often fast-paced nation of America, speaking with the Hmong may require patience and grace.

The history of the Hmong people is a combination of many wars with relatively small segments of peace in between. They are thought to have arisen in Eurasia and traveled to China. In China they were considered outsiders and were known as the Miao, or Meo, which, when translated, is not a favorable name. The feeling was mutual—the Hmong viewed the Chinese as meddling, and it was against this intrusion that the Hmong rebelled. The tension between the Hmong and their oppressors, the Chinese, resulted in fierce battles on both small and large scales. Eventually the Hmong retreated to more southerly latitudes and adapted a lifestyle suited to the mountains. For a brief time they successfully held onto a kingdom independent of and recognized by its neighbors, but the Chinese claimed it again. This on-again-off-again relationship continued for a thousand years, after which the Hmong divided. Some stayed in China but a large number trekked to Indochina, carrying everything they owned. They made homes where there were no inhabitants. If their neighbors were not welcoming, the Hmong fought them, and if that failed they continued farther on their trek. When the French took control of Indochina, the Hmong who resided there staged a revolt so fierce that it gained the attention of France. French officials were forced to make an exception for the Hmong, who then settled into quiet lives of farming in the mountains. The Hmong's fierce independence and dislike of institutionalized, preconceived notions of what is proper and the expectation that they will submit to those ideals made them disliked by all who attempted to conquer them. However, when left alone to govern themselves, their groups are peaceful and industrious, a fact that bears credence on their fate in America.



Chapter 3

Chapter 3 Summary and Analysis

During Lia's third month of life, her older sister slammed the door of the apartment in which the Lee's resided. Within moments following the door's closing, Lia's first seizure commenced. The Lee family was convinced that the door's slamming had been so frightening as to make Lia's soul fly away. Once gone, her soul was captured by a dab, or evil spirit. What had occurred was known as qaug dab peg in Hmong (translated as "the spirit catches you and you fall down"). Western medicine equates quag dab peg with epilepsy. In the Hmong tradition, epilepsy is an illness of honor. Because so few are afflicted, the Hmong reasoned that the soul in concern was special. In fact, most Hmong who have epilepsy are revered as txiv neeb (shaman). In light of this traditional belief, the Lees were only mildly concerned following Lia's first episode. Like all good parents, they were loving and attentive to their child and expressed their concern that what she experienced was not entirely normal. However, their concern was dampened by their pride that she could be a txiv neeb, which would truly be an honor for her and the Lee family. While they appreciated the honor, Lia's parents would have been content to have their child's health restored and do without her special attributes. Over the next few months Lia had twenty more seizures. Her parents were concerned enough to bring her to the Merced Community Medical Center (MCMC) for evaluation. They were skeptical of western medicine but gave it a try.

Unfortunately, they were severely misunderstood at the hospital. By the time they arrived, Lia's seizure had stopped. They were unable to converse due to the different languages spoken by the parties (Hmong by the Lees and English by the MCMC physicians) and no translators were available. Lia had a cough and a congested chest which led the physician to order an X ray. The X ray revealed bronchial congestion. Bronchial congestion occurs frequently in epileptics who suffer from aspiration during their seizures, but because there was no reason to suspect epilepsy, the congestion was attributed to pneumonia. Lia was discharged with a prescription for antibiotics and instructions written in English which her parents were unable to read. A month later Lia had another bad seizure, her parents brought her to MCMC, and the same conclusion was made. Four months later, in March of 1983, Lia was brought to MCMC again. The circumstances were different and in her favor. She was still seizing upon her arrival, her family brought along an English speaking cousin, and a resident named Dan Murphy was on call. In an effort to discover the source of Lia's seizures, Dan admitted her to the hospital and ran a barrage of tests. They were unable to find a cause, but her medical chart now included a diagnosis of epilepsy with secondary chest congestion. Her parents stayed by her bedside twenty-four hours per day until she was released one week later with prescriptions for an antibiotic as well as Dilantin, an anticonvulsant medication prescribed to prevent seizures.



Chapter 4

Chapter 4 Summary and Analysis

By the 1980s, the Hmong people had already begun to distrust American physicians. A Hmong woman who had immigrated to America returned to a refugee camp in Thailand and visited her fellow countrymen who remained there. They asked her countless questions about America and American medicine. Apparently, word had traveled fast and what they heard was not favorable. Of course the refugees asked about the accessibility and use of a traditional txiv neeb, but they also asked why American physicians took samples of blood and performed surgery. Keeping in mind that the Hmong believed that illnesses arise from the spiritual realm, not the physical, it made no sense to them that one person would cut into another's body. They also wondered what they did with the material afterward. Did doctors eat Hmong body parts? The question may sound ridiculous to one who is familiar with medical practices in America, but the idea of a biopsy is equally absurd to many Hmong. This juxtaposition in belief systems is further compounded by the requirement of touch. A txiv neeb does not touch his patients, but American doctors rely greatly on the sense of touch. A txiv neeb senses things in the spirit world, while his American counterpart senses nothing intuitively and asks pointed questions, often of a private nature, to reach a diagnosis. Doctors asked their patients to undress, touched them, and performed procedures that, according to their beliefs, threatened the lives and souls of Hmong individuals.

Despite these discrepancies, the Hmong had learned to value medication, such as antibiotics, that required no physical intervention and seemed to help the healing process. For this reason many Hmong would seek the advice of American physicians, submit to some of their requests (as deemed appropriate by the patient—not as requested by the doctor), and then return home for a traditional healing session with a txiv neeb. Medicine was not a foreign concept. The Hmong grew many herbs that they believed had healing properties and this practice continued after their immigration. Like many of their peers, the Lees grew herbs in the parking lot behind their apartment building. They grew a limited number of the twenty varieties utilized by Hmong herbalists in their homeland.



Chapter 5

Chapter 5 Summary and Analysis

Lia was admitted to MCMC seventeen times between the ages of eight months and four and a half years. She was seen by the staff on countless other occasions that did not require admission. Her medical chart from this time describes her as a female Hmong child well known to the facility. It often includes notes about her close bond with her mother and the language barrier that existed between the staff and Lee family. Although the hospital employees and the Lees failed to communicate, the opposite could be said for Lia and her family. Her parents were very affectionate with her and she enjoyed their cuddling. Lia seemed to know when a seizure was coming and ran to her parents for a reassuring hug. They would place her on a soft mat they kept on the floor of their living room. It was kept there to cushion her body from its impact with the floor during the inevitable thrashing associated with her seizures. The frequency and severity increased in conjunction with her age. Lia experienced grand mal seizures on a regular basis and sometimes had multiple seizures in a row without regaining consciousness in between. These occasions, called "status epilepticus" were frightening for the Lee family as well as the doctors.

The physicians and nurses had a difficult time placing an intravenous line into the veins of the convulsing girl, but its placement was necessary to administer the medication that would halt the seizure. In addition to the obvious challenge of sticking a moving target, Lia was also overweight and the thick layer of fat beneath her skin made locating veins difficult. During her seizures, Lia frequently stopped breathing. The MCMC employees were aware that during this time her brain was deprived of oxygen and that this could cause permanent damage, so every second was crucial. Lia was met in the emergency room by the resident on call and nursing staff, but her care was overseen by Neil Ernst and Peggy Philp, a husband and wife team who headed the pediatric residency program at MCMC. Neil and Peggy saw so much of Lia that they became emotionally attached to her and were deeply saddened by the situation, but remained unable to effectively communicate with Lia's parents. They observed that in her early years Lia was a well loved, happy child who babbled and played appropriately for her age. They feared that if her seizures could not be controlled she might ultimately regress. When she was well, Lia was demonstrative. She breastfeed beyond infancy and was eager to be held by any adult present, but especially by her parents.

The nurses grew to know Lia well. Years later they would recall her with a mix of emotions. She was a joy to watch interact with her parents, but a difficult patient for the nurses. She was highly energetic and disliked taking her medications. The prescription she took most often was Dilantin, but over time her medicinal requirements changed repeatedly. The Lee family, still unable to read English, found giving her the required medications difficult. They were confused about what to give at what time and in what dose. When Lia came to the hospital her lab work often revealed inadequate levels of the prescribed drugs in her blood. This led Neil and Peggy to become incredibly



frustrated. They felt that her seizures could be prevented by a proper drug protocol, but they could not persuade the Lees to comply. From their perspective, the Lees non-compliance endangered Lia's life. The issue at hand was less about compliance and more about recognition and understanding. Once the miscommunication was recognized, Lia's doctors attempted to rectify the situation by sending a nurse to her apartment for home visits. The nurse tried labeling the bottles and calendar many different ways, but the language barrier remained.

In 1984, Lia's medical chart began to include notes about a questionable developmental delay. Lia was showing the first signs of mental retardation. It was difficult to assess the extent of her capabilities, however, because one of her prescribed medications, Tegretol, caused hyperactivity, which made cognitive testing problematic. By that time, Neil and Peggy's frustration was enormous. They spent endless nights awake caring for Lia in the emergency room, saw her for routine checks, and even spent some of their time off researching Hmong culture for the benefit of the Lee family. In return, they received no thanks, no payment (the Lees were Medical recipients), and their orders for medication they believed to be life enhancing and possibly life saving were ignored. Through the translation of distant family members, Foua and Nao Kao told MCMC staff that they had ceased giving medication to Lia because they believed it caused her to be wild. As conscientious physicians, it was increasingly difficult for Neil and Peggy to watch Lia's regression. In response to the Lees continued inability and unwillingness to provide the prescribed medication, Neil notified Child Protective Services. He recommended that Lia be removed from her home, stating that her life was in danger due to lack of medicinal enforcement.



Chapter 6

Chapter 6 Summary and Analysis

Unfavorable reports of Americans continued to trickle back to the refugee camps. The cycle of misunderstandings, fear, and distrust was perpetuated. These negative feelings were not relieved by the attending physicians, mostly because the physicians were unaware of how grossly they were perceived. At that time, American universities failed to teach its students classes in cross-cultural empathy and communication. Therefore, the newly graduated physicians didn't recognize the Hmong patient's beliefs, and even if recognition had occurred the personnel wouldn't have known what to do to accommodate it. Considering that the Hmong believe in illnesses of the soul and the importance of a mind/body/soul connection, it was nearly impossible for the doctors to satisfy the Hmong by practicing only Western medicine. A more agreeable treatment plan would include therapy and job placement, thereby boosting self confidence, productivity, and generalized happiness of the soul (and body).

Like victims of trauma from other nations, emotional pain, fatigue, and disorientation can present as chronic pain in a patient. Additionally, the culture barrier made interpersonal, non-verbal communication as difficult as conversation. Hmong hierarchy places emphasis on age and gender, with elderly males being the most respected. Following this hierarchy can be difficult for an English speaking physician faced with an older Hmong man who speaks no English and is accompanied by his granddaughter who does. Eye contact is considered a sign of respect in America but is viewed as intrusive and overly familiar in Hmong culture, likewise with touch.

Impaired communication was particularly dangerous with the Hmong population. As a group they experienced higher incidences of diseases such as diabetes and tuberculosis and could have greatly benefited from medical help. Explaining a diagnosis and obtaining informed consent to proceed with the recommended treatment was the point where it all fell apart. The doctors at MCMC felt anxiety with regard to the treatment of their Hmong patients. They wanted to practice medicine as they had been trained because they felt it was safe. They did not care for the way in which their suggestions were ignored or overruled by the patient's family or clan members. This was particularly concerning in emergency situations such as an extreme health crisis or a baby's imminent birth. The doctors' ideals were challenged repeatedly, and some experienced professional burn-out. Those who fared better did so by not taking the Hmong's criticisms personally and by proceeding with an attitude of indifference. They wore their indifference like a coat of armor and practiced something akin to veterinary medicine (where the patient doesn't speak so the doctor makes educated guesses about the patient's condition and acts accordingly).



Chapter 7

Chapter 7 Summary and Analysis

Neil and Peggy were not the kind of doctors who practice veterinary medicine. Instead, they were the kind of doctors that believe in their profession and truly want to help other people. The end result was that they provided high quality care equally to all of their patients. Once it became apparent that the language barrier prevented proper dispensing of Lia's medication, they were faced with a conundrum. They had prescribed multiple drugs in different doses because that was what they deemed necessary. However, that regimen wasn't working because the parents found it too confusing. It occurred to them that if they had prescribed just one drug, the resulting streamlined approach might have been easier for her parents to follow. If so, it may have resulted in a more constant intake of prescribed medication and fewer seizures. This was a concession, however. Prescribing just one inferior drug, was, in their mind, substandard care and a form of discrimination. The desire to practice quality medicine and to provide all patients with equal opportunities for health led Neil to file a report with Child Protective Services. He was not happy to file the petition but felt he would be negligent if he failed to do so. He was required by California law to report findings (questionable or confirmed) of child abuse and/or endangerment.

When Lia was forcefully removed from her home her mother was not present. The family was given no advance warning. Foua had been out visiting relatives, a trip she would later regret. Nao Kao felt helpless to stop the social workers (who he misidentified as police officers). When Foua returned, Nao Kao informed her that Lia was "government property" and that he didn't know her location. Foua grieved and became suicidal. Her clan learned of Lia's disappearance and their distrust of doctors grew. In requesting help from a higher agency, Neil was overpowering Lia's parents, a fact that did not go unnoticed. Child Protective Services (CPS) placed Lia in the foster home of Dee and Tom Korda, a loving couple who embraced not just Lia but eventually her biological family as well. Lia was nearly three years old when she entered foster care. Having benefited from her mother's constant and affectionate care, Lia did not make the transition easily. She cried constantly and was incapable of self soothng. Jeanine Hilt, the CPS caseworker assigned to visit Lia in the Korda's home, noted her unease and inappropriate treatment of the other children in the Korda's care. Lia's medications were adjusted, yet again, and her outbursts improved, but her seizures continued. Foua began visiting Lia regularly in the Korda's home. Dee, an experienced foster parent, immediately recognized Foua as a loving parent and viewed the situation as a tragic mistake. Her condition deteriorated and Jeanine felt the need to intervene. She personally taught Foua to measure and administer Lia's medication properly. After twelve long months, Lia returned home.



Chapter 8

Chapter 8 Summary and Analysis

The author recalled her introduction to Hmong culture and the Lee family. She was interested in investigating the circumstances surrounding Lia's health care but was warned by fellow colleagues. Their advice was daunting and they felt her journey lacked promise. She was instructed on the proper etiquette of Hmong conversation and expected her visits to be awkward. Indeed, her first few visits were disastrous, but this was not because the Lees were unwelcoming. Anne (the author) learned to navigate their cultural differences. Anne employed numerous translators before finding a resource in Sukey Waller, a psychologist who worked regularly with Hmong clients. Sukey was not associated with MCMC, so any negative feelings the Lees had about their daughter's health care were not automatically transferred to Anne. Sukey introduced Anne to the leaders of the Hmong clans. With Sukey at her side, Anne received a warm welcome. To speak with the Lees on a regular basis, Anne knew that she would need not just a translator, but someone who was familiar with the practice of Hmong life. She found a comfortable rapport with May Ying Xiong. May was a twenty-year-old Hmong woman employed as a clerk at the center for refugee services. Her family was one of the few Hmong families to distinguish itself by successfully living a Hmong life within America. For example, May's father was a well known txiv neeb, but he was also a soldier who trained under the CIA. As the second generation of this Hmong family, May was particularly adept at bridging the cultural divide.

Though they knew no formal birth dates, Foua appeared to be about forty-five years old, and Nao Kao fifty-five. They were a dark, handsome couple who shared in laughter. Anne was admittedly ignorant at the beginning of their relationship. Foua and Nao Kao lived in a three bedroom apartment on the second level of a building in Merced, California. The neighborhood was largely populated by Hmong and cultural rituals abounded. The only possessions the Lee family considered important were the qeej, a traditional bamboo instrument that belonged to Nao Kao, and the herb garden Foua tended to in the parking lot below. Anne, accompanied by May, usually visited the Lee family in the evenings, and she recorded their sessions with a tape recorder. They settled into an easy banter punctuated by May's injected voice. As they grew more familiar with one another, the Lees granted Anne permission to review all of Lia's records and answered all of her questions without reserve. They honestly wanted to help Anne with her writing, but they also wanted her to understand their point of view so that she could recount it to the doctors at MCMC. Their disconnect was so complete that some Americans considered the Hmong stupid or lazy, adjectives that Foua internalized and berated herself for. As Anne listened to Foua recount her daily life in Laos, she realized that the Hmong were incredibly industrious but that their skill set was not applicable to their new lives in America.

Chapter 9

Chapter 9 Summary and Analysis

When Lia first returned home from her time in foster care, everyone was elated. Her family celebrated by sacrificing a cow and inviting many relatives to rejoice with them. While commonplace in Hmong culture, Americans are uncomfortable with the idea of ritual sacrifice, especially when it is in the public domain. The Hmong killed the animals cleanly and efficiently, offered thanks, and consumed the whole animal, leaving virtually nothing to waste. Despite these efforts, the ritual sacrifices were not appreciated. Therefore, an ordinance was created to ban animal sacrifice within the city limits. This law was difficult to enforce. It would seem easy to be aware of the slaughter of a large animal, such as a cow, but chickens were readily sacrificed with little notice at all.

Although Lia's homecoming was widely celebrated, the Lee's happiness waned as they realized that Lia was not returned in the same way that she had left them. Lia's mental regression could be accurately linked to her increasing seizure activity, but the timing was suspect and the Lees began to blame the government and the prescribed medication for Lia's condition. They viewed her decline in foster care as proof that only their love and traditional medicine would benefit Lia. They spent extravagant sums of their welfare benefits as well as Lia's supplemental security income on traditional healing methods that they hoped would cure the illness and return her to the happy girl they remembered and cherished. Their use of alternative medicine is documented because Jeanine Hilt took the time to solicit their opinions about their daughter's health and care, and to relay that information to Lia's doctors. Although Jeanine undoubtedly had other clients to care for simultaneously, she took exception to Lia and became quite close to her family, serving as their advocate when no one else would. Together they managed to maintain appropriate levels of Lia's prescribed medication and her regression and associated seizures slowed. Then, in 1986, while swinging at a day school for the handicapped, Lia fell, hit her head, and seized severely. She was admitted to MCMC in a terrible state. They had difficulty stabilizing her and she required an extended hospital stay of fourteen days. Three weeks later Lia was admitted again. Peggy and Neil were dismayed by Lia's downward trend and began to feel that Lia's death was inevitable. Her seizures were increasingly hard to suppress and they feared that one day they would be unable to do so.



Chapter 10

Chapter 10 Summary and Analysis

The Hmong people were accustomed to life in the mountains. It was said that when they emerged from the mountains and entered the lowlands they walked with an awkward gait. Their connection to the mountains could be seen in other ways as well. The inhabitants of Laos could be characterized by the altitude at which they lived, with each subgroup having distinguishing qualities. Different crops were farmed and animals hunted at each elevation and the tribes remained separate. All of their needs could be fulfilled within the individual communities. While technically governed by their lowland peers, the Hmong managed to maintain autonomy by literally looking down on them. The Hmong had the specific advantage of growing and harvesting opium. The crop required the cool temperatures and alkaline soil found in the mountains. Because it was in demand, opium proved a profitable crop for the Hmong. It was the currency in which the Hmong begrudgingly paid the required tax to the French government.

In 1954, the Geneva Accords recognized Laos, Cambodia, and Vietnam as independent states. Laos was smaller than all of its neighbors, and politically neutral. As such, it became a battleground, and this effectively ended the Hmong's peaceful life in the mountains. Unsure of what was the "right" side, but unwilling to become subservient to others' political interests, the mountain Hmong fought an anti-communist battle funded largely by America. Its soldiers were trained by members of the CIA. In return for their efforts in battle, the Hmong soldiers were promised political asylum at the war's end. Some estimate that as much as ninety percent of the Hmong male population died or suffered casualties fighting the American war. Aside from the obvious effects this had on the interpersonal relationships of the Hmong, the land was destroyed and farming was impossible. The Hmong first lost their men and then their livelihoods. When their villages were destroyed, the Hmong refugees swarmed the border of Thailand, filing into temporary camps where they first encountered the twenty-first century.



Chapter 11

Chapter 11 Summary and Analysis

November 25, 1986 was the day Lia's doctors had dreaded. Lia had been suffering from a mild runny nose for a few days and had a diminished appetite. She had a seizure around dinner time. The seizure passed but her parents noted that she remained "sick" and requested ambulance transport for her to MCMC. The EMT who arrived at the scene attempted to stabilize her but was not able to. Realizing that important time was being lost, the EMT ordered the driver to rush back to the hospital while he continued his attempts in the back of the ambulance. When Lia arrived at the hospital she was still unresponsive. She was attended by a team of emergency room staff, nurses, and residents who desperately tried to intubate her and start an intravenous line. Both proved difficult. When the IV line was finally placed and medication was flushed into it, Lia continued to seize. After testing her blood gases, the physicians learned that she was slowly asphyxiating. A breathing tube was applied and her breathing was manually controlled to force oxygen into her body. Neil was on call that night. He was summoned from dinner with his family and arrived quickly at the hospital. After receiving huge amounts of medication through her precarious IV, Lia finally stopped seizing. The staff was accustomed to Lia and immediately ran the usual barrage of tests. It was concluded that she had been taking her anticonvulsant medication, so her parents' previous non-compliance was not an issue. Her seizure had been triggered by a low grade fever associated with her symptom of a runny nose, but in the chaos no one checked her temperature. Because no temperature was detected, no infection was suspected, and no antibiotics were administered. The staff concentrated solely on managing her severe seizures.

After two hours she finally stopped seizing and was transferred to Valley Children's Hospital in Fresno. It had a children's ICU that MCMC lacked. Neil explained the seriousness of the situation to her parents as well as the need for Lia to be transported to another facility. He informed them that he was leaving the following day for his Thanksgiving vacation but that Lia would be well cared for. He spoke in English. Through the interpreting services of their nephew, Foua and Nao Kao heard a different message: their daughter was being sent away because Neil and Peggy were leaving on vacation. During the ambulance ride to Fresno, Lia's temperature escalated to 104.9 degrees and she ceased to be stable. She seized repeatedly and her extremities turned blue. Lia's explosive diarrhea and multiple system failure caused the Valley Children Hospital's lead physician, Dr. Kopacz, to diagnose septic shock resulting in subsequent seizure (as opposed to her seizure being the main problem).

On Thanksgiving morning, Lia's blood began oozing out of her IV sites. She required a total blood transfusion. When Lia's parents arrived at the Fresno hospital, their daughter was on the verge of death. They learned that she had been subjected to a spinal tap, a procedure the Hmong believe to be fatal to the soul. Their consent was never requested due to the severity of the situation, and even if it had been requested, there is no

translation from English to Hmong for the majority of the medical words used to describe Lia's status. Her parents were dismayed with her care and were unaccustomed to the regulations of the ICU. They could see that Lia was comatose but thought she would awaken. They did not seem to understand that the prolonged lack of oxygen had left Lia brain-dead. The doctors prepared the family, who were joined by Jeanine Hilt and Dee and Tom Korda for Lia's death. Life support was discontinued. It was assumed that Lia would die in Fresno, but Foua and Nao Kao had other ideas. Having just experienced what they perceived to be Lia's worst medical care yet, they wanted Lia returned to Merced to die surrounded by her brothers and sisters. During her time at Valley Children's Hospital, it was discovered that her crisis was caused by an opportunistic bacteria most likely acquired in a hospital setting.



Chapter 12

Chapter 12 Summary and Analysis

The Lee family's journey to America was long and arduous. They first attempted to leave Laos in 1976. At that time they were captured by Vietnamese soldiers and forced back to their village at gunpoint. After three more years in an occupied, war-torn country, the Lees reconsidered escape. They didn't have enough food to eat and the infant Foua was breastfeeding died of starvation when her milk supply waned. Their 1979 attempt was successful but not without hardship. The Lee family left Laos along with four hundred other refugees. They hiked through the forest to avoid soldiers. They carried babies and the elderly on their backs. Many died along the way due to illness, starvation, or injury. The soldiers tried to force them out of hiding by starting brushfires and setting mine traps. After walking for twenty-six straight days, they crossed the border into Thailand. They spent a year in various Thai refugee camps before being relocated to the United States. While in one of these transient camps they lost another daughter, Ge.

While the Lee family's travel was difficult, there was quite a scale in terms of conditions. Some families left with their animals, which they killed along the way, so they had ample food. Others starved to death. Some families lived closer to the border than others. The average trek to the border took a month, but some refugees hid in the forests for multiple years. The babies were drugged with opium to keep them from crying and giving away the clan's position. Sadly, many refugees who survived the journey across land died in the final crossing of a great river, the Mekong, which separates Laos from Thailand. The majority of refugees filed into the Ban Vinai camp, which housed an excess of 42,500 people. The refugees were given food, clothing, and shelter and awaited resettlement, thus beginning a cycle of dependency. The United States was not the only country to receive Hmong immigrants, but it did receive the vast majority. At its height, twenty-five thousand were admitted in just one year. Young families were eager to start over somewhere else, but some of the older refugees were reluctant to leave. They had no choice, however, because Thailand closed the Ban Vinai camp in 1992. Of its nearly twelve thousand inhabitants, some chose America, some reluctantly returned to Laos, and some seemed to just disappear into the surrounding area, possibly into the protected grounds of a nearby monastery.



Chapter 13

Chapter 13 Summary and Analysis

The Lee family's journey was indeed terrible, but they and their fellow travelers hoped for a better life in the future. It never occurred to Foua and Nao Kao that their children would be in danger once they arrived in America. After spending eleven days at Valley Children's Hospital, Lia returned to MCMC on December 5, 1986. She was admitted to the pediatric unit under Peggy's care. They all thought her time there would be short. She appeared to be in constant pain and her breathing was poor. The Hmong New Year occurred during Lia's time at MCMC. Despite the festivities normally partaken for the holiday, Lia's family was determined to keep vigil by her bedside. Nao Kao demanded that the hospital stop giving Lia medications because, in his opinion, they were killing her. He did not see her death as inevitable. He and Foua also continued to bring traditional Hmong healing herbs and enlist the therapy of a shaman. After removing the IV lines and halting prescription drugs, Lia spiked a fever that reached 107 degrees, but still she survived. Foua and Nao Kao announced their intention to bring Lia home to their apartment. They were appalled at Lia's state and offended by the doctor's prognosis. The doctors consented and Jeanine helped to gather medical supplies to fulfill all of Lia's needs. Foua and Nao Kao brought Lia home, washed her, and then anointed her body with healing herbs as was their custom.



Chapter 14

Chapter 14 Summary and Analysis

On October 18, 1980 the Lee family arrived in America. At that time they had six surviving children. They had traveled from Laos to Thailand, where they flew on to Hawaii and then Oregon. The Lees sought help from their family members who had settled in Oregon a few months previously. They were instructed about the purpose and use of electricity. The refrigerator, television, and toilet were new concepts. The Lees lived in Portland for two years before relocating to Merced, California. After seventeen years of living in America, Foua and Nao Kao became accustomed to electricity but still felt as though they were living in a foreign land. Foua relied on her children to shop at the local market because she never learned English. They kept the Hmong language, religion, food, and holidays alive within their home.

Historically, the Hmong have always held strongly to their culture. In the 1920s, some effort was made to help immigrants assimilate. The automobile manufacturer, Ford, offered its immigrant workers free "Americanization" classes. Many of its immigrant workers came to America with the hopes of assimilating. This vision was not shared by the Hmong, who came to America less by choice and more as a result of desperation. As such, they were involuntary immigrants and resisted the proverbial American melting pot. This did not mean that the Hmong refused to work. In fact, some brought gardening tools in their luggage but found little use for them. General Vang Pao reportedly asked the American government for a plot of land where the Hmong could farm and congregate. They would have been very content as a self-supporting culture, independent yet safe within the borders of the United States. The request was thought to be irrational and expensive, not to mention setting a precedent that the US government would not want to repeat. Instead, many Hmong reside within the United States and the vast majority are not productive (by American standards) and draw from the welfare system. The younger generations have found balance between their family's traditions and the culture into which they were assigned, but the older members still find American customs peculiar and/or confusing. The clash of cultures has created unfortunate misunderstandings. Sometimes these feelings escalate into resentment and taunting, behaviors which the Hmong ignore until it becomes impossible to do so. For the most part, Hmong immigrants try to maintain the isolation they enjoyed in Laos before the war by interacting exclusively with other Hmong and continuing their cultural traditions.

Chapter 15

Chapter 15 Summary and Analysis

When the author, Anne, first met the Lee family, Lia was in a persistent vegetative state. She was a quadriplegic making only spastic, involuntary movements. Lia had surprised her doctors by living in this state for more than two years. Lia continued to be adored by her family. Foua groomed her beautifully and carried Lia on her back in an ornamental Hmong wrap known as a nyias. Lia remained able to conduct the non-voluntary actions of breathing, swallowing, sleeping and waking, as well as sneezing, grunting, and crying. However, her grunting and crying could not be associated with emotions or communication and her eyes seemed vacant, or, at times, scared. According to the medical establishment, Lia's actions were pure reflex.

Her parents believed differently. When Lia was discharged from MCMC and her doctors believed her death to be imminent, she had a fever, irregular breathing, and was incapable of swallowing. After a few days of her parents care she was medically stable. Additionally, after one week she no longer required the nasogastric tube that had been placed by the hospital for feeding. When Lia cried her parents would hold her and the crying would stop. Like a baby, she responded positively to rocking and touch. Lia had regular visits with Terry Hutchinson, the neurologist at Valley Children's Hospital, as well as with Neil and Peggy at MCMC. On Lia's first visit back to MCMC, Neil was moved by her state. He felt sad about the turn of events. Neil expected Lia's parents to blame him, but they associated Lia's regression not with him but with the medicine she was given at Valley Children's Hospital. Foua was more forgiving than Nao Kao, but they were both kind to Neil and Peggy. Neil and Peggy were impressed by the care provided to Lia by her parents. Although Lia was incontinent, she was always clean. She subsided on baby formula and soft food which resolved her obesity. She no longer seized. As time went by, and the doctors became increasingly comfortable with her health, Lia's primary point of contact became a friendly nurse named Martin Kilgore. Most importantly, Kilgore was an advocate for Hmong immigrants and was well educated about their plight. What he possessed in education he sometimes lacked in tact.

Although Lia would have qualified for institutionalization, her family never considered it. They carried her everywhere, provided for all of her care, and she slept in her parents' bed every night. Although they expressed feelings of sorrow, they never considered Lia to be a burden. This is not surprising. Anthropologists have often noted that Hmong families are especially good care providers and invest a great deal of energy in their child rearing.



Chapter 16

Chapter 16 Summary and Analysis

In Merced, California, one out of every six residents is Hmong. Yet if one were to drive around Merced, you wouldn't necessarily run into them. California's Central Valley has attracted immigrants from many other ethnicities as well as Hmong. The Hmong community can be found by crossing the tracks of the Southern Pacific Railroad, moving in a direction away from the tree lined residential streets of the town. Ironically, prior to the railroad's existence, the area now inhabited by Hmong was known as Chinatown. The Hmong resided in two story apartment buildings. The front doors overflowed with children. The parking lots were home to more herb gardens than cars and the grocery store's staple item for sale was rice. Merced housed the largest percentage of Hmong per area in California. This dense cluster of Hmong ensured the vitality of their culture. Fourteen different clans were present in Merced. When considered as a whole, they are incredibly organized and peaceful. In some ways Merced appears to be a piece of Laos that has been picked up and then dropped down again in America. And then one considers the topography. The semi-nomadic life to which Hmong were historically linked has been replaced by tenement buildings. The area is not conducive to farming, which leads to high unemployment. High unemployment leads to low morale. This cycle is partly a result of foreign interests who, after destroying Laos through warfare, encouraged the camp lifestyle of dependency instead of the self sufficiency the Hmong had practiced for thousands of years.

Dang Moua was the exception. He pursued American life with an unparalleled zealousness. He was the local grocer and essential pig farmer. He also successfully launched and maintained California Custom Social Services, a business that supplied interpreters and taught naturalization classes. Upon his arrival in America, Dang and his family settled in Virginia. He was a hard worker and worked two jobs to support his family. With any remaining free time he studied the agricultural assets of other regions. It was based upon this information that he packed his family and moved to California (it was some consolation that a brother of his also lived in California). He first worked as a migrant crop picker and trapped wild rabbits for their evening meal. At that time few Hmong were in residence. Soon after Dang's relocation, other Hmong families began arriving in large numbers. They came from all across the country seeking agricultural work (to which they were well suited) as well as the support of their peers. The community that resulted was so large that there was not enough available work to sustain it. California's laws made welfare available and the Hmong accepted this trade. Some believed it was due to them as payment for their service during the war, and others just found themselves without applicable skills and a large family to care for. While the influx of such a great number of immigrants taxed the system, subsequent generations fared better. They are strong students who acquire solid educations and progress to gainful employment.



Chapter 17

Chapter 17 Summary and Analysis

After Lia's initial progress following her return home, she seemed to be in a holding pattern. All signs of infection were gone and she no longer seized, but it was evident that the damage her brain sustained was permanent. Her siblings surpassed her in growth and mental aptitude and some left home to attend college. Over the years, Jeanine Hilt and Dee Korda stayed in contact with the Lee family. They watched over Lia and her family and tried to help in any way possible. In 1993, Jeanine Hilt suffered from an asthma attack so severe that she lost all brain function, just like Lia. She remained in a vegetative state for three days before passing away. Her death was especially difficult for Foua, who had trusted and loved Jeanine.

Neil and Peggy continued on their career paths, both earning prestigious awards and positions. After Lia's return to MCMC, a mutual understanding was achieved. True affection was achieved when Neil and Peggy's son, Toby, was diagnosed with leukemia. Foua was very supportive of them and they developed a deep sense of respect and understanding for her. Fortunately, three years of chemotherapy forced Toby's cancer into remission. Still, the experience provided a bonding experience for Foua and Peggy. The emotional tie was unbreakable, but the Lee family's relationship with the hospital was tenuous at best.

Nao Kao continued to practice traditional medicine and was usually successful. He reluctantly brought family members to the hospital, but only for emergencies. They declined all vaccinations and kept a wide berth from medical establishments. The close nature of Hmong clans virtually guaranteed that others kept their distance as well. Lia's family correctly assessed the situation. If they had remained in Laos, Lia would have died of natural causes or they would have had the proper healing herbs. In America, where they believed the Americans caused her illness, there was no cure. Instead, Lia and her family experienced prolonged suffering. This is predominantly because American doctors are bound to an oath to preserve life. This desire is what motivated the changes in her drug treatment and all of her medical care. The author questions, however, if the more humane thing might actually have been to do less. Less confusion, less anger, and less suffering may have been more beneficial to the family. The areas which could have benefited from greater quantity were communication, empathy, and patience.

Chapter 18

Chapter 18 Summary and Analysis

After interviewing all of the parties involved, the author concluded that Lia's life was cut short by misunderstanding more than any other factor. At every step along the way the choices made could have been different, and may have had better outcomes if communication was improved. This issue transcends Lia and the Hmong community. Any person, when working with someone from another ethnic background, is responsible for ensuring respect and proper communication. As love and understanding grew between Foua and Lia's doctors, their communication improved. However, Lia's life might have been very different if healthy communication existed from the beginning. Cultural considerations, such as a female doctor treating Foua and Lia, might have made the Lees more comfortable. Limiting testing and blood draws would have shown respect for their religious beliefs. Other obvious improvements include the presence and availability of interpreters and leniency in the rules regarding the quantity and schedule for family visitation. In retrospect, one can see that many of the Hmong traditional therapies work, either by resolving the issue or by bringing a sense of hope and peace. For this reason, incorporating cultural practices into the patients' course of care is recommended.

The importance of culture to healing is being recognized on a wider basis. Textbooks now include chapters dedicated to cultural sensitivity. Whole courses that revolve around this topic are taught at major medical universities. In 1996, Merced's Health department completed training in advocacy and cultural skills. They have also begun a community outreach program to explain western medicine and some of the common misconceptions regarding it. Doctors are encouraged to bring a more humane approach to their patient interactions and to consider the emotional and spiritual components as well as the physical being.



Chapter 19

Chapter 19 Summary and Analysis

Chapter nineteen opens with the Lee family preparing for a txiv neeb healing ceremony they requested for Lia. The pig to be sacrificed cost two hundred and twenty five dollars. The txiv neeb accepts no payment, but will join them for the feast after the ceremony. A wooden altar is set up in the Lee's living room, and the txiv neeb places his sacred tools on it. These include a saber, gong, tambourine, rice, candle, and holy water. First a pig was tied to the members of the Lee family, thus intertwining their souls. Then the pig was thanked for its service and sacrificed. Next came Lia's name calling, during which they hoped Lia's soul would hear their request to come back. To search for her soul, the txiv neeb entered his signature trance. The Hmong believe that he boards a winged horse and travels across vast distances negotiating with dabs for the return of the patient's soul. On this occasion it was Lia's name he chanted.

Characters

Lia Lee

Lia Lee is the main character in Anne Fadiman's book *The Spirit Catches You and You Fall Down*. Lia Lee was born on July 19, 1982 at Merced Community Medical Center in California. As the fourteenth child of Hmong immigrants, she was the first of her family to be born in America. Her family traveled to the United States to escape the devastation war had wrought in Laos, their homeland. They hoped their children would find peace in America. What awaited them was complete culture shock. This was exacerbated by a language barrier so complete that their daughter, Lia, received inadequate health care.

At the time of her birth, the medical chart described her as being eight pounds seven ounces and healthy. The delivery was uncomplicated and Lia appeared normal. However, during her infancy, Lia began having seizures. At their onset, her parents were nervous, but not distraught, because in the Hmong religion, individuals who have epilepsy are marked as special and often go on to revered positions within the clan. Still, the seizures were unsettling and her parents brought her to the emergency room at MCMC. On the first two occasions Lia's seizures had ended prior to her arrival. Due to the lack of persistent symptoms and language barrier, her condition was misdiagnosed.

In March of 1983, when Lia was brought to MCMC again, she was in the midst of a seizure and was diagnosed with epilepsy. Far from benign, however, her seizures came rapidly, frequently, and were hard to control. Her parents had a difficult time deciphering her medical regimen. When Lia would arrive at the hospital convulsing, it became increasingly difficult for the doctors to manage her seizures. A downward spiral commenced.

Lia was removed from her parent's home and placed in foster care where the dispensing of her medication on a regular schedule could be guaranteed. Even with this precaution, her seizures continued. The oxygen deprivation caused during her seizure episodes made Lia start to regress. She lost her trademark exuberant personality and speech skills. Then she suffered from septic shock and seized so completely and for such an extended period of time that she was unable to recover. This event, called "status epilepticus", left Lia in a vegetative state. Lia's doctors thought she would die shortly thereafter, but she defied the odds. Lia's parents decided to care for her at home rather than in a hospital setting. Throughout her life they tried many Hmong traditional herbs and healing ceremonies. Her parents continued to shower her with affection, but recognized that her body seemed lifeless, as if her soul had departed. For the remainder of her life they carried Lia on their backs in a traditional Hmong fabric baby sling called a nyias.



Foua and Nao Kao Lee

Foua and Nao Kao Lee are the parents of the main character, Lia. Formal birth dates were not known, but the author surmised that Foua appeared to be about forty-five years old, and Nao Kao fifty-five. Foua was sure that she was born in the month of October because it corresponded to the agricultural calendar to which she was accustomed (her parents said she was born during the month when the opium was weeded for the second time). After resettling in America, Foua and Nao Kao continued to define dates by planting seasons and time by when the roosters crow. They were a dark, handsome couple who shared in both laughter and sorrow. They lived in a three bedroom apartment on the second level of a building in Merced, California. The neighborhood was largely populated by Hmong, and cultural rituals abounded. The only material possessions the Lee family considered important were the qeej, a traditional bamboo instrument that belonged to Nao Kao, and the herb garden Foua tended to in the parking lot below.

The Lees considered family to be of utmost importance. They treasured each of their children, but especially Lia. Ensuring their children's safety was what motivated them to leave their homeland. They first attempted to leave Laos in 1976. At that time they were captured by Vietnamese soldiers and forced back to their village at gunpoint. After three more years in an occupied, war-torn country, the Lees reconsidered escape. Their 1979 attempt was successful but not without hardship. After walking for twenty-six straight days, they crossed the border into Thailand. They spent a year in various Thai refugee camps before being relocated to the United States. In the United States they suffered from culture shock. Their daughter Lia required extensive medical care. Communication between her parents and her physicians was impaired by their differences in language and culture. Foua was gentle and forgiving by nature. She became accustomed to Lia's many care providers and was able to forgive them for Lia's poor medical treatment. Nao Kao had a more difficult time understanding and forgiving the actions of the medical establishments with which he had entrusted his daughter's care. They were justifiably skeptical of American medicine and clung to their Hmong belief system.

Neil Ernst and Peggy Philp

Lia's care was overseen by Neil and Peggy, a husband and wife team who headed the pediatric residency program at Merced Community Medical Center. Neil and Peggy balanced their careers, children, and even exercise on a specific schedule that had been perfected over their many years of practice. They saw so much of Lia that they became emotionally attached to her and were deeply saddened by her decline, but remained unable to effectively communicate with Lia's parents. They observed that in her early years Lia was a well loved, happy child, and feared that if her seizures could not be controlled she might ultimately regress. Years later they would recall her with a mix of emotions. She was a joy to watch interact with her parents, but a difficult patient.



The Lee family, unable to read English, experienced difficulty administering Lia's epilepsy medications. They were confused about what to give at what time and in what dose. When Lia came to the hospital her lab work often revealed that she had inadequate levels of the prescribed drugs in her blood. This led Neil and Peggy to become incredibly frustrated. They felt that her seizures could be prevented by a proper drug protocol, but they could not persuade the Lees to comply. From their perspective, the Lees non-compliance endangered Lia's life. Lia's doctors attempted to rectify the situation by sending a nurse to her apartment for home visits. They spent endless nights awake caring for Lia in the emergency room, saw her for routine checks, and even spent some of their time off researching Hmong culture for the benefit of the Lee family. In return they received no thanks, no payment (the Lees were Medical recipients), and the orders for medication that they believed to be life enhancing and possibly life saving were ignored. As conscientious physicians, it was increasingly difficult for Neil and Peggy to watch Lia's regression.

In response to the Lees continued inability and unwillingness to provide the prescribed medication, Neil notified Child Protective Services. He recommended that Lia be removed from her home, stating that her life was in danger due to lack of medicinal enforcement. This strained the relationship between Lia's parents and Neil and Peggy. During Lia's time in foster care, Neil and Peggy continued to care for her because, even with regular doses of medication, she still experienced seizures. On November 25, 1986 Lia was admitted to the hospital with a seizure that Neil couldn't control. She had an underlying infection that went unrecognized. Her body suffered septic shock, her convulsions continued unremittingly, and her brain was deprived of oxygen. This cascade of events rendered her both brain dead and quadriplegic. As compassionate doctors, Neil and Peggy were deeply troubled by Lia's state and Neil felt partly responsible for the outcome. They eventually developed a deep bond with Foua when their own son developed leukemia.

Jeanine Hilt

Jeanine Hilt was the CPS caseworker assigned to work with Lia during her time in foster care. Jeanine watched as Lia's condition deteriorated, when she felt the need to intervene. She personally taught Foua to measure and administer Lia's medication properly. Together they managed to maintain appropriate levels of Lia's prescribed medication, and her regression and associated seizures slowed. This success directly resulted in Lia's return home from foster care. Jeanine took the time to solicit Foua and Nao Kao's opinions about their daughter's health and care, and to relay that information to Lia's doctors. Although Jeanine undoubtedly had other clients to care for simultaneously, she took exception to Lia and became emotionally quite close to Lia and her family. She served as their advocate when no one else would. Over the years, Jeanine Hilt remained in contact with the Lee family. She watched over Lia and her family and tried to help in any way possible. In response, the Lee family affectionately called her Jenny. In 1993, Jeanine suffered an asthma attack so severe that she lost all brain function, just like Lia. She remained in a vegetative state for three days before



passing away. Her death was especially difficult for Foua, who had trusted and loved Jeanine.

Drs. Hutchinson and Kopacz

On the night that Lia's brain experienced prolonged oxygen deprivation, Neil attempted to stabilize her. Recognizing the limitations of MCMC and the severity of Lia's condition, he recommended her transfer to Valley Children's Hospital in Fresno, California. At the time that she was admitted, Doctor Kopacz was on call to receive her. Lia's explosive diarrhea and multiple system failure caused him to diagnose septic shock resulting in subsequent seizure (as opposed to her seizure being the main problem). On Thanksgiving morning, Lia's blood began oozing out of her IV sites. She required a total blood transfusion. When Lia's parents arrived at the Fresno hospital, their daughter was on the verge of death. They learned that she had been subjected to a spinal tap, a procedure the Hmong believe can be fatal to the soul. Her parents were dismayed with her care and were unaccustomed to the regulations of the Intensive Care Unit. During her days in the ICU, Lia was examined by Dr. Kopacz's colleague, Dr. Hutchinson. Dr. Hutchinson specialized in neurology and provided Lia's follow up care on an outpatient basis. Foua and Nao Kao could see that Lia was comatose but thought she would awaken. They did not seem to understand that the prolonged lack of oxygen had left Lia brain dead. Lia's parents directly attributed Lia's demise to the care she received at Valley Children's Hospital.

Korda Family

Following Neil's recommendation that Lia be removed from her parent's care, she was placed in the foster home of Dee and Tom Korda. They were a loving couple who embraced not just Lia but eventually her biological family as well. Lia was nearly three years old when she entered foster care. Having benefited from her mother's constant and affectionate care, Lia did not make the transition easily. She cried constantly and was incapable of self soothing. Dee, a mother herself, recognized Lia's sorrow and felt a kinship with her. Foua visited Lia regularly in the Korda's home. Dee, an experienced foster parent, immediately recognized Foua as a loving parent and viewed the situation as a tragic mistake. In a statement of trust, she even left her own children in Foua's care while she brought Lia to her required appointments. After Lia returned to her family's home, Dee stayed in touch with Foua and continued to visit with her and Lia.

Dang Moua

Dang Moua provides an excellent example of the opportunities available to the immigrant population residing in the United States. He pursued American life with an unparalleled zealousness. Upon his arrival in America, Dang and his family settled in Virginia. He was a hard worker and worked two jobs to support his family. With any remaining free time he studied the agricultural assets of other regions. It was based



upon this information that he packed his family and moved to California (it was some consolation that a brother of his also lived in California). He first worked as a migrant crop picker and trapped wild rabbits for their evening meal. At that time few Hmong were in residence, but soon after Dang's relocation others began arriving in large numbers. This influx provided Dang with opportunity. He became Merced's local grocer and essential pig farmer. He also successfully launched and maintained California Custom Social Services, a business that supplied interpreters and taught naturalization classes.

Anne Fadiman

Anne Fadiman is the author of *The Spirit Catches You and You Fall Down*. She utilizes the first person writing voice. Her interjections can be found on nearly every page. At the time of her research, Anne was unmarried and in her thirties. She was searching for a subject to write about and had heard rumors of a "cultural collision" in a California hospital. Anne awkwardly tried to navigate the Hmong community. In her own words, she was "culturally ignorant". After many hours of evening interviews, she became familiar with Hmong practices. She developed a rapport with the Lee family and was committed to telling their story.

May Ying Xiong

To speak with the Lees on a regular basis the author recognized that she would need not just a translator, but someone who was familiar with the practice of Hmong life. She found a comfortable rapport with May Ying Xiong. May was a twenty-year-old Hmong woman employed as a clerk at the center for refugee services. Her family was one of the few Hmong families to distinguish itself by successfully living a Hmong life within America. For example, May's father was a well known txiv neeb, but he was also a soldier who trained under the CIA. As the second generation of this Hmong family, May was particularly adept at bridging the cultural divide.

CIA

According to the author, the CIA was responsible for the training of Hmong soldiers who constituted the majority of the anti-communist troops in Laos. Because of its international agreements, the American government could not send its own soldiers into Laos. The indirect way of ensuring that communism failed in Indochina was to train the Hmong and provide them with the supplies and food necessary to sustain them through the fighting. As such, America, and the CIA in particular, destroyed the traditional Hmong way of life and began a perpetual cycle of dependency that continues to this day.



Objects/Places

Laos

In the 1970s, the country of Laos was made a political pawn and war ensued. It is a narrow country nestled between Vietnam, Thailand, and, to the south, Cambodia. It was declared both independent and neutral. However, at the time of the Vietnam war the region was at risk for being overthrown by communist forces. In an effort to prevent this from happening, the United States financed and completely supported an internal anti-communist effort fought by the Hmong. The so-called "Silent War" devastated the topography of the country, and most of its inhabitants fled to other countries as refugees.

Merced

Merced, California became the home of many Hmong immigrants. Of all of the United States cities that Hmong settled in, Merced has the largest percentage of Hmong per area, making the Hmong community a miniature town of its own. As such it retains a cultural feel. Hmong language, food, and religion abound.

Merced Community Medical Center

Merced Community Medical Center is the medical facility that cares for the residents of Merced, including its Hmong population. MCMC is where most of Lia's health care occurred. The staff tried to control her epilepsy but found this endeavor to be exceedingly difficult.

Valley Children's Hospital

On the night that Lia was admitted to MCMC with uncontrollable seizures, it was determined that she needed care that MCMC could not provide. She was transferred to Valley Children's Hospital's pediatric intensive care unit. At VCH, the diagnosis of septic shock was made. Although she later returned to MCMC and eventually to her home, Lia never recovered.

Ban Vinai

Ban Vinai was the largest of all of the refugee camps. It was located in Thailand, and the majority of the displaced Hmong residents traveled to it. From the camp they were relocated to other countries, including the United States.



nyias

A nyias is a traditional Hmong baby carrier. It is made of ornamental fabric and worn on the back. Usually babies and toddlers are carried this way, but Foua carried Lia this way following Lia's paralysis.

Korda's home

The Korda's home was Lia's foster placement.

Oregon

Oregon was the state in which the Lees first resided upon their immigration. They later resettled in California.

Mekong River

The Mekong River provides a natural border between Laos and Thailand. Many refugees lost their lives trying to cross the raging river into safety. The border patrol was aware of their desire to flee and often opened fire on those who tried to cross.

Lee's apartment

The Lee's resided in Apartment A on East 12th Street in Merced, California. Their apartment was the site of the many interviews conducted by the author. On each occasion the Lees supplied her with an honorary red folding chair reserved for their guests.

Themes

Culture

Culture plays an important role in *The Spirit Catches You and You Fall Down*. Aspects of Hmong culture discussed in this book include language, foods, and religion. The Hmong language has eight distinctive tones. Its words often include onomatopoeia. The Hmong people traditionally live off of the land which they inhabit. Thus, they have many words used to describe noises and actions that relate to nature. Ailments are discussed in terms of the spirit, not the physical body. Their diet is also closely related to their way of life. In their homeland, the Hmong farm rice and opium. Rice is their staple diet and is infused irregularly with meat. The meat of choice, when available, is from a pig or chicken. The Hmong also enjoy vegetables and herbs. The herbs used in cooking are home grown by Hmong families. After immigrating to the United States, many Hmong families continued their traditional practices. They grew herbs in the parking lots behind their homes. They subsided off of rice and the occasional chicken or pig meat. Meat was most often consumed in association with religious ceremonies.

The Hmong utilize spiritual and homeopathic healing. The person presiding over religious ceremonies is called a txiv neeb. The txiv neeb is thought to travel through time and dimension in search of lost souls. He also eradicates dabs, or evil spirits, who lurk everywhere. His success ensures the health of the individual in question. He is also called upon to confer the name of an infant and formally introduce it to its clan members. Ritualistic sacrifice and herbal healing may seem to oppose the medical practices observed in America. American medicine is often referred to as "western", meaning that it relies on facts and pathology. This is opposed to eastern countries, whose healing methods are considered "alternative" by westerners. This difference of opinion leads to pain for all involved.

According to the author, most Hmong people living in America wish to be left alone and live their lives according to tradition. However, their traditions sometimes collide with established procedures in America, such as welfare, insurance, and medical care. At these times the differences between the two cultures may seem insurmountable. The language and culture barriers prevent positive communication, and miscommunication perpetuates fear, anger, and disappointment. Members of each culture view each other as having little in common and find it difficult to understand each other.

Family

The family unit is of utmost importance to the Hmong people. From a traditional point of view, the nuclear family comes first, followed by relatives as distinguished by clan, which are then followed by race. In comparison, everything else is unimportant. In their homeland, all members are equal. All labor is commenced to ensure the health of one's family and clan. Everyone completes the same work, on the same schedule. It is a



communal effort and no one person is more (or less) important than another. The Hmong have religious rites with regard to birth and death that signify the importance of linking ancestors to living family members. The dead are buried with honor and their souls are believed to travel. Anthropologists have often noted that the Hmong family unit is stronger than any other. They place great significance on child rearing. Being a parent is an honor and each child is a blessing to be cherished. The mother stays at home with her children, of which there are often ten or more. Among her many tasks are cooking, sewing, and embroidering their clothes.

In addition to the Lee family (the Hmong family discussed in this book) several of the other characters' family lives are revealed. Neil and Peggy have two children. Not only do they have fewer children than the Lees, but their lifestyle is different. Neil and Peggy both lead fulfilling full time careers. Neither of them are considered stay at home parents, but they do balance their schedules. One parent is always at home in the afternoon to greet their children when they return home from school. The Korda family, where Lia is sent for her time in foster care, have their own children, but are also open to helping others. They open their hearts and home to various children in need. To some, including Lia, they become and remain close, essentially creating a large and impromptu extended family. Another character, Jeanine Hilt, has a life partner, but they share no children together. This may provide some insight as to why she became so passionate about Lia's case. The feeling was reciprocated by the Lees, and Foua was upset by Jeanine's death. Foua was quoted as saying that she felt like she had "lost her American daughter". Each of the book's characters value the importance of family.

Traditional Elements

The Spirit Catches You and You Fall Down introduces some elements of traditional Hmong culture. These include the qeej, mortar and pestle, herbs, and nyias. The qeej is a versatile musical instrument. Young Hmong men learned to play it. It was used in courting a girl and later in religious ceremonies. In this book the father figure, Nao Kao, was a skilled qeej player. It was the only material thing he carried out of his homeland. Once they relocated it hung on the wall of their apartment. Traditional qeej were constructed from bamboo, but in America qeej were sometimes made out of PVC pipe. Supposedly, if the musician was skilled enough, the soul would recognize the sound regardless of its construction.

Foua also brought with her one cherished item. She carried her mortar and pestle set on their journey to America. Hmong culture values the use of herbs. Homeopathy is practiced. There are twenty herbs commonly used in their homeland. Some are used more often than others. The most important continued to be grown in America by those who immigrated. Tinctures, teas, and poultices were created out of the herbs. All were considered to have healing benefits. Like many immigrant families, the Lees grew a miniature herb garden behind their home. Foua was in charge of growing and harvesting the herbs. When Lia became sick they used herbs to try to make her well again. Foua used her mortar and pestle to grind the herbs down to the required consistency.



Hmong adults carry their children in fabric carriers known as a nyias. A nyias is usually used for carrying babies and toddlers. Following her paralysis, Lia was carried in a nyias. Her family preferred it to the pediatric wheelchair, which was her alternative method of locomotion. Foua practiced attachment parenting and preferred to have Lia with her at all times. Foua personally sewed the nyias and then decorated it. Ornamentation was considered a skill in Hmong culture. The local store featured a variety of beads for this purpose. In addition to the nyias, Foua took care to adorn New Year's clothing for her children. This was an important Hmong holiday and required proper dress.

Style

Perspective

The author, Anne Fadiman, wrote her novel from the first person perspective. While she is not an integral character, she uses the pronoun "I" often. In doing so, she offers the reader her perspective. For instance, she admits to being ignorant of Hmong culture when she first began investigating Lia's circumstances. She was motivated solely by curiosity. She was not aware of Hmong etiquette or cultural taboo. By the middle of the book it is clear the Anne has grown a fondness for the Lee family. She always describes them in a positive light. She clearly empathizes with their plight. She does not, however, place any blame on the medical community. Instead, she tries to enlighten the reader about Hmong culture. This enlightenment could shed light and result in more compassion. To this end, she questions the decisions made regarding Lia. She makes the argument for changes in the medical field. Most notably this would include interpreters for both oral and written language. The book encourages not just ethnic tolerance but true appreciation.

Tone

The tone of *The Spirit Catches You and You Fall Down* is often somber. The Hmong people immigrate to America as refugees from a war-torn country. Many die and those that survive have a difficult journey. Integration into American society is difficult for many and impossible for some. Lia, the main character, has a medical crisis and is left brain dead and paralyzed before the age of five. The tragic events evoke a state of contemplation. The author manages to throw in some anecdotes that are humorous (see, for example, chapter two: Fish Soup) which helps to keep the book from being too heavy.

Structure

The Spirit Catches You and You Fall Down consists of nineteen chapters. The story encompasses approximately three hundred pages of text. The remaining pages include a preface, sections for notes, and lengthy bibliography and index. The chapters are not chronological in nature. The setting alternates between present time (location: Merced, CA), the 1970s (location: Laos and Thailand) and traditional Hmong folklore. Despite this variation, the chapters do flow nicely and are easy to follow.



Quotes

"As it turned out, the encounters were messy but rarely frontal." p. viii

"She invented the precise day of the month, like the year, in order to satisfy the many Americans who have evinced an abhorrence of unfilled blanks on the innumerable forms the Lees have encountered since their admission to the United States in 1980." p. 7

"It took the Lee family about a month to save enough money from their welfare checks, and from their relatives' welfare checks, to finance a soul-calling party for Lia." p. 10

"The Hmong have a phrase, 'ais cuaj txub kaum txub, which means 'to speak of all kinds of things.'" p. 12

"Not only were they fed up with being persecuted, but their soil was also getting depleted, there was a rash of epidemics, and taxes were rising." p. 16

"Despite the careful installation of Lia's soul during the hu plig ceremony, the noise of the door had been so profoundly frightening that her soul had fled her body and become lost." p. 20

"Becoming a txiv neeb is not a choice; it is a vocation." p. 21

"When Dan first met the Lees, he instantly registered that they were Hmong, and he thought to himself: 'This won't be boring.'" p. 27

"When Hmong people die in the United States is it true that they are cut into pieces and put in tin cans and sold as food?" p. 32

"Lia's chart eventually grew to be five volumes, longer than the chart of any other child who has ever been admitted to MCMC, and weighed thirteen pounds eleven ounces, considerably more than Lia weighed when she was born there." p. 40

"Neil Ernst was a doctor of a different breed." p. 78

"'If there was ever going to be a way, it was Lia's way,' she told me." p. 86

"The most important part of the Lee home was the parking lot." p. 98

"The practice of swidden farming is inextricably intertwined with the migrant identity of the Hmong." p. 123

"Vang Pao was both the cornerstone of the war and its most cryptic figure." p. 129

"When it became apparent that there would be no more planes, a collective wail rose from the crowd and echoed against the mountains." p. 139



"Her lips and nail beds were blue." p. 142

"We carried the babies and when we came to steep mountains we tied ropes to the children and the old people and we pulled them up." p. 156

"If the United States seemed incomprehensible to the Hmong, the Hmong seemed equally incomprehensible to the United States." p. 188

"Lia's black hair was still shiny, her skin was soft and fine, her lips were still pink and shaped like a Cupid's bow." p. 216



Topics for Discussion

Discuss a txiv neeb ceremony. What is used and what is its purpose?

The Hmong believe in dabs. What is a dab and where might one encounter a dab?

Describe Ban Vinai. In what ways was it both a good and not so good place to be?

The Lees lost many children. Describe what may have contributed to this sad circumstance.

Neil and Peggy are consummate doctors. They believe in giving the best, and sometimes most complicated, care possible. Discuss how Lia's drug regimen could have been improved from their perspective. Now discuss the same question from the Lee's perspective.

Who was Jeanine Hilt, and in what ways was she instrumental in Lia's care?

Foua and Nao Kao were very disappointed with Lia's care at Valley Children's Hospital. What went wrong?

Describe Merced, before the wave of immigration and at the time this book was written.

Why was Laos so important to foreign nations?

Explain the opium trade as it relates to the history of the Hmong.