



4-1-2000

## The Least of These

Kael Moffat

Follow this and additional works at: <https://scholarsarchive.byu.edu/byusq>



Part of the [Mormon Studies Commons](#), and the [Religious Education Commons](#)

---

### Recommended Citation

Moffat, Kael (2000) "The Least of These," *BYU Studies Quarterly*. Vol. 39 : Iss. 2 , Article 13.  
Available at: <https://scholarsarchive.byu.edu/byusq/vol39/iss2/13>

This Essay is brought to you for free and open access by the Journals at BYU ScholarsArchive. It has been accepted for inclusion in *BYU Studies Quarterly* by an authorized editor of BYU ScholarsArchive. For more information, please contact [ellen\\_amatangelo@byu.edu](mailto:ellen_amatangelo@byu.edu).

# The Least of These

Kael Moffat

One Saturday in February 1997, while my family and I lived in Orange, California, I had the opportunity to volunteer at a free medical clinic in Santa Maria, Baja California, Mexico. At the time, I worked in the marketing department of a large medical group, and the clinic in Mexico was run by one of our sister facilities. Since I'm neither a doctor nor a nurse and cannot speak Spanish, all I was good for was grunt work—carrying and organizing boxes of donated food, clothing, and medicine.

After a couple of hours in the clinic, Dr. Sunati, the head physician, asked me if I would like to accompany him on a house call. I eagerly put together two large bags of food, clothes, and plastic utensils; picked up the small bag of medicine that the doctor had set aside; and rushed out to his van.

A minute or two later, Dr. Sunati came out with his nurse, Sonya Valdez, and her five-year-old son, Michael. Dr. Sunati is a large Iranian man who had escaped to the United States seven years after Khomeini seized power in Tehran. He climbed into the driver's seat, turned to Sonya, and picked up the conversation they had been having in Spanish, a language he seemed more comfortable speaking than English. Sonya is a bit shorter than I am, with a slight build, an infectious smile, and the brightest dark eyes I have ever seen. Michael is loud—in both English and Spanish.

We backed out of the clinic and started down the muddy road, which was cratered and washed out by recent storms; then we headed up one of the steep hills overlooking the village. We stopped on a street near the top and climbed out of the van into sticky, tannish yellow mud that sucked the bottoms of our boots like tar. I stood for a moment facing west, the afternoon sun hidden by clouds, the Pacific breeze ruffling my hair. Across the street, fifteen houses made of rotting four-by-sixes and warped sheets of plywood clung to the doughlike hillside, most of them surrounded by whitewashed walls of unevenly laid brick.

Down the street, six boys and three middle-aged men with large oval bellies and bottles of Corona in their hands jeered and prodded two loud, snappy mutts held apart from one another by struggling boys who jerked the dogs' necks by twisting and pulling their rope collars. They yelled phrases I remembered from high school when fights broke out between rival gang members. Up the street the other way, a bus started up, its cough and rumble almost as loud as the snarls of the dogs, who were suddenly released and set upon each other with their yellow eyeteeth and black claws slashing the air.

Dr. Sunati led us down a narrow set of stairs made of mud-filled, concrete cinder blocks to an even narrower alley between two of the poorer “houses” on the downslope of the street, which were made of rotting two-by-fours and green-painted plywood. We ducked into a doorway on the right. Dr. Sunati stepped over to an old woman standing at a small electric stove, stirring a pan of rice.

“Maria, ¿qué pasa?” he said.

She shrugged her shoulders, looked down, slapped her small thigh with her free hand, “Ohhh. . . .”

The small room was lit by a single forty-watt bulb dangling from the ceiling, and although there was a stiff breeze in the alley, the room smelled as if it had never been aired out. On one of the two twin mattresses pushed together in the corner lay a gray-haired old man dressed in a tank top and shabby blue pants. Running his hand through his stringy hair, he regarded all of us suspiciously—but me most of all, I think, because I was the gringo.

Dr. Sunati and the old woman mumbled to one another; then she took the rice off the burner, laid the spoon down on the stove top, and walked toward me, turning her shoulders and hips sideways and slipping past me into the alley. I backed out and let the others go ahead of me.

We followed the old woman to a small concrete patio littered with rusty old brackets and hose clamps, rubber tubing, chicken wire, and old milk cartons, all covered by an overhang made of studs and sagging press-board held up by braided electrical wire. A chicken coop stood a foot away from the concrete pad, full of Leghorns and a couple of Banties. A skeletal apricot tree struggled in the middle of it all.

The old woman hurried to a small shack to the left of the patio. Its walls were unpainted and its door, which she held open, was a faded brown, almost red. I was the last visitor to step into the room, the old woman following behind me, rattling off that swift Baja California Spanish. The room was smaller than the other we had been in, but less cluttered. Its inside walls were bare, the west-facing window cataracted by dust, both inside and out. Against the wall across from the door, an old open-tub washing machine chugged and rocked back and forth, sloshing the thick gray blanket of bubbles inside it. Behind the washing machine, on the two-by-four spacers between the studs, stood a bottle of laundry detergent, a Mason jar filled with screws and nails, a plastic motorcycle, and the torso, head, and arms of a Barbie doll. A candle with the image of the Holy Virgin stood beside the doll.

Against the walls opposite the window and immediately adjacent to the door were two twin-sized beds, and on each lay what looked like a child about age nine or ten, both with extreme cases of cerebral palsy and a large bulge on their heads. Each was dressed in a diaper and thin T-shirt. One of the children began to wail as soon as we entered the room.

As Dr. Sunati and the old woman spoke together, Sonya leaned over to me and, in short bursts of English, explained the case history of these two patients. They were brother and sister—he was seventeen and she was nineteen—and they had never been outside of the room. Born with encephalitis, both were blind and had been abandoned by their mother. The old woman found them alone and had been taking care of them ever since. The children, she said, should have died long ago, considering their poor living conditions and the fact that they had only recently received any medical attention at all.

The doctor started with the boy. Curled on his dingy gray-, lime-, and orange-striped sheets, he turned his head upwards as Dr. Sunati touched the fine black hair on his misshapen head. The boy wore a permanent half grin. Under different circumstances, he would have been called a “happy child” rather than “blissfully ignorant.” The doctor gave him a quick examination, turned to the bag of pharmaceutical samples I held, gave the old woman a handful of antibiotics, murmured some instructions, and walked over to the girl’s bed.

Every couple of minutes since we had entered the room, she had dropped her cry to a whimper and scanned the room as if she could actually see and gauge us; then she turned her face to the ceiling, folded her legs to her chest, pulled her blanket up to her chin, and sobbed again. But, as the doctor approached, her cry reached an almost panicked pitch. Dr. Sunati motioned the old woman over to him, and she whispered to the girl as they pried the blanket loose from the girl’s fingers; pulled it back, exposing her to the cold wind coming through the door; and stretched her legs out straight. The doctor checked the sores on her legs, then her mouth and ears, then her scalp.

As his sister was being examined, the boy moved his head around, smiling, every once in a while reaching his hand out toward the cluster of voices whispering in Spanish and English near his head. Sonya and her son went over to the boy and held his hands.

The walls above the beds were covered with pictures from magazines. Above the boy’s bed were pictures of soccer players—Carlos Valderrama and Mauricio Cienfuegos—as well as advertisements of exotic sports cars with bikini-clad women on the hoods. Above the girl’s bed were pictures of elegant models and couples holding hands. I supposed the old woman had taped these images to the wall to cheer herself up during the many hours she spent in the room with the sightless children. One particular picture, a clothing ad, stood out. It showed a woman with long, bleached-blond hair, dressed in a white tank top and jeans and looking over her shoulder. As I looked again at the picture of the model in the tank top, I could imagine the old woman holding the girl, telling her how beautiful she was. The pictures were a shrine to both futility and hope.

Dr. Sunati finished examining the girl and backed away from her, talking to the old woman and reaching for another box of antibiotics. The girl, nearly frantic, pulled the blanket over her head, cried, then stuck her head out to scan the room again.

I stood looking at her, thankful she was blind so that I could watch her intently and not have either of us feel ashamed. Pity filled every corner of my body. I thought of the mother and wondered where she was and whether she had any other children (I kind of hoped not). I wanted to do something for the girl but was painfully aware that I could do nothing significant for her, nothing of any long-term value. All I could really do was help her stop crying. I felt a distinct desire to help her feel loved, lovely, and loveable, but all I could offer her was an insufficient moment of respite from the terror she was feeling—terror on a scale I could never comprehend.

“Let her feel love . . . let her feel love,” I prayed as I stepped toward her and touched the locks of jet hair that curled about her face like runners from a grape vine. She quieted down to a whimper; raised her hand up, palm facing the ceiling; and rested the back of her hand on her chin. I rested my index finger on her palm, and she clamped down on it. I extracted my finger and offered her my whole hand. She snatched it up and moved the back of my hand to her warm, moist cheek and held it there. I sat down next to her on the bed from which she had never risen. Her sheets and blankets stank of urine and feces. Her legs were no longer than toy baseball bats, and her back was twisted from lying down for almost twenty years. She squeezed my hand again and emitted a tiny sigh of relief.

As she held my hand to her face and I felt her tears and the sharp bones beneath her papery skin, the song “A Poor Wayfaring Man of Grief” stirred within me—“These deeds shall thy memorial be”—and I was suddenly struck with how insubstantial my memorial had been. I thought of how I would leave the village later that afternoon and go back to a warm home with plenty of food in the cupboards, a computer, shelves of CDs and books, and, most importantly, my wife and two healthy children. I could drive, play soccer, fish, and watch movies with my son and daughter. In spring I would camp, fish, and hike. I thought about how, at the same time, this young woman and her brother would spend dark nights in this cold room, which they had never left for almost two decades, about the meager warmth their worn sheets and tattered blankets offered, about how, during the next rainstorm, water would run under the door and pool against the wall beneath the window, causing the studs to mildew again.

I thought of what Christ told his disciples: “Inasmuch as ye have done it unto one of the least of these . . . ye have done it unto me.” I suppose that thought should have comforted me, but it did not, and as I sit here almost a year later and write this in my comfortable apartment in Stillwater,

Oklahoma, it still does not. This scripture tells me that what I did was good and right, but it cannot cancel the heartbreak I felt holding that girl's hand, knowing that the rest of her life would be uncomfortable and terrifying—as it always had been. And, while I believe that after the resurrection the Savior will take her into his arms, tell her how much he missed her, and welcome her into his kingdom, I cannot escape the sense of tragedy I feel whenever I think back on her tears and small angular body.

The trials and tribulations of others can, and ought to, try us as well. Didn't Alma teach that baptism should signify our willingness to "mourn with those that mourn . . . and comfort those that stand in need of comfort"? Maybe what Alma was trying to teach us is that between the intellectual apprehension, the testimony, and the honest application of a gospel principle there is a space where the emotional impact of our experiences should overpower us, should drive us from merely counting our blessings and occasionally acting in a Christlike way to actually *being* Christlike.

I still feel the effect of that space when I think back on that girl and her brother shivering together in their dark worlds and of how, before following Dr. Sunati, Sonya, Michael, and the old woman out of the room, I leaned over and kissed the girl on her forehead. If I had spoken her language, could I have said anything important? I simply kissed her and left the room, and, as the old woman closed the door behind me, I heard the girl begin to weep again.

---

Kael Moffat (moffatj@okstate.edu) is a master's candidate in English at Oklahoma State University, and a Brigham Young University graduate (1996). This essay won second place in the 1998 BYU Studies essay contest. Kael lives in Stillwater, Oklahoma, with his wife and two children.