

THE EVENING AND THE MORNING AND THE NIGHT

Octavia Butler

When I was fifteen and trying to show my independence by getting careless with my diet, my parents took me to a Duryea-Gode disease ward. They wanted me to see, they said,

where I was headed if I wasn't careful. In fact, it was where I was headed no matter what. It was only a matter of when: now or later. My parents were putting in their vote for later.

I won't describe the ward. It's enough to say that when they brought me home, I cut my wrists. I did a thorough job of it, old Roman style in a bathtub of warm water. Almost made it. My father dislocated his shoulder breaking down the bathroom door. He and I never forgave each other for that day.

The disease got him almost three years later—just before I went off to college. It was sudden. It doesn't happen that way often. Most people notice themselves beginning to drift—or their relatives notice—and they make arrangements with their chosen institution. People who are noticed and who resist going in can be locked up for a week's observation. I don't doubt that that observation period breaks up a few families. Sending someone away for what turns out to be a false alarm... Well, it isn't the sort of thing the victim is likely to forgive or forget. On the other hand, not sending someone away in time—missing the signs or having a person go off suddenly without signs—is inevitably dangerous for the victim. I've never heard of it going as badly, though, as it did in my family. People normally injure only themselves when their time comes—unless someone is stupid enough to try to handle them without the necessary drugs or restraints.

My father had killed my mother, then killed himself. I wasn't home when it happened. I had stayed at school later than usual, rehearsing graduation exercises. By the time I got home, there were cops everywhere. There was an ambulance, and two attendants were wheeling someone out on a stretcher—someone covered. More than covered. Almost... bagged.

The cops wouldn't let me in. I didn't find out until later exactly what had happened. I wish I'd never found out. Dad had killed Mom, then skinned her completely. At least that's how I hope it happened. I mean I hope he killed her first. He broke some

of her ribs, damaged her heart. Digging.

Then he began tearing at himself, through skin and bone, digging. He had managed to reach his own heart before he died. It was an especially bad example of the kind of thing that makes people afraid of us. It gets some of us into trouble for picking at a pimple or even for daydreaming. It has inspired restrictive laws, created problems with jobs, housing, schools... The Duryea-Gode Disease Foundation has spent millions telling the world that people like my father don't exist.

A long time later, when I had gotten myself together as best I could, I went to college—to the University of Southern California—on a Dilg scholarship. Dilg is the retreat you try to send your out-of-control DGD relatives to. It's run by controlled DGDs like me, like my parents while they lived. God knows how any controlled DGD stands it. Anyway, the place has a waiting list miles long. My parents put me on it after my suicide attempt, but chances were, I'd be dead by the time my name came up.

I can't say why I went to college—except that I had been going to school all my life and didn't know what else to do. I didn't go with any particular hope. Hell, I knew what I was in for eventually. I was just marking time. Whatever I did was just marking time. If people were willing to pay me to go to school and mark time, why not do it?

The weird part was, I worked hard, got top grades. If you work hard enough at something that doesn't matter, you can forget for a while about the things that do.

Sometimes I thought about trying suicide again. How was it I'd had the courage when I was fifteen but didn't have it now? Two DGD parents—both religious, both as opposed to abortion as they were to suicide. So they had trusted God and the promises of modern medicine and had a child. But how could I look at what had happened to them and trust anything?

I majored in biology. Non-DGDs say something about our disease makes us good at the sciences—genetics, molecular biology, biochemistry... That something was terror. Terror and a kind of driving hopelessness. Some of us went bad and became destructive before we had to—yes, we did produce more than our share of criminals. And some of us went good—spectacularly—and made scientific and medical history. These last kept the doors at least partly open for the rest of us. They made discoveries in genetics, found cures for a couple of rare diseases, made advances against other diseases that weren't so rare—including, ironically, some forms of cancer. But they'd found nothing to help themselves. There had been nothing since the latest improvements in the diet, and those came just before I was born. They, like the original diet, gave more DGDs the courage to have children. They were supposed to do for DGDs what insulin had done for diabetics—give us a normal or nearly normal life span. Maybe they had worked for someone somewhere. They hadn't worked for anyone I knew.

Biology school was a pain in the usual ways. I didn't eat in public anymore, didn't like the way people stared at my biscuits—cleverly dubbed “dog biscuits” in every school I'd ever attended. You'd think university students would be more creative. I didn't like the way people edged away from me when they caught sight of my emblem. I'd begun wearing it on a chain around my neck and putting it down inside my blouse, but people managed to notice it anyway. People who don't eat in public, who drink nothing more interesting than water, who smoke nothing at all—people like that are suspicious. Or rather, they make others suspicious. Sooner or later, one of those others, finding my fingers and wrists bare, would fake an interest in my chain. That would be that. I couldn't hide the emblem in my purse. If anything happened to me, medical people had to see it in time to avoid giving me the medications they might use on a normal person. It isn't just ordinary food we have to avoid, but about a quarter of a *Physicians' Desk Reference* of widely used drugs. Every now and then there are news stories

about people who stopped carrying their emblems—probably trying to pass as normal. Then they have an accident. By the time anyone realizes there is anything wrong, it's too late. So I wore my emblem. And one way or another, people got a look at it or got the word from someone who had. "She *is!*" Yeah.

At the beginning of my third year, four other DGDs and I decided to rent a house together. We'd all had enough of being lepers twenty-four hours a day. There was an English major. He wanted to be a writer and tell our story from the inside—which had only been done thirty or forty times before. There was a special-education major who hoped the handicapped would accept her more readily than the able-bodied, a premed who planned to go into research, and a chemistry major who didn't really know what she wanted to do.

Two men and three women. All we had in common was our disease, plus a weird combination of stubborn intensity about whatever we happened to be doing and hopeless cynicism about everything else. Healthy people say no one can concentrate like a DGD. Healthy people have all the time in the world for stupid generalizations and short attention spans.

We did our work, came up for air now and then, ate our biscuits, and attended classes. Our only problem was house-cleaning. We worked out a schedule of who would clean what when, who would deal with the yard, whatever. We all agreed on it; then, except for me, everyone seemed to forget about it. I found myself going around reminding people to vacuum, clean the bathroom, mow the lawn... I figured they'd all hate me in no time, but I wasn't going to be their maid, and I wasn't going to live in filth. Nobody complained. Nobody even seemed annoyed. They just came up out of their academic daze, cleaned, mopped, mowed, and went back to it. I got into the habit of running around in the evening reminding people. It didn't bother me if it didn't bother them.

“How’d you get to be housemother?” a visiting DGD asked.

I shrugged. “Who cares? The house works.” It did. It worked so well that this new guy wanted to move in. He was a friend of one of the others, and another premed. Not bad looking.

“So do I get in or don’t I?” he asked.

“As far as I’m concerned, you do,” I said. I did what his friend should have done—introduced him around, then, after he left, talked to the others to make sure nobody had any real objections. He seemed to fit right in. He forgot to clean the toilet or mow the lawn, just like the others. His name was Alan Chi. I thought Chi was a Chinese name, and I wondered. But he told me his father was Nigerian and that in Ibo the word meant a kind of guardian angel or personal God. He said his own personal God hadn’t been looking out for him very well to let him be born to two DGD parents. Him too.

I don’t think it was much more than that similarity that drew us together at first. Sure, I liked the way he looked, but I was used to liking someone’s looks and having him run like hell when he found out what I was. It took me a while to get used to the fact that Alan wasn’t going anywhere.

I told him about my visit to the DGD ward when I was fifteen—and my suicide attempt afterward. I had never told anyone else. I was surprised at how relieved it made me feel to tell him. And somehow his reaction didn’t surprise me.

“Why didn’t you try again?” he asked. We were alone in the living room.

“At first, because of my parents,” I said. “My father in particular. I couldn’t do that to him again.”

“And after him?”

“Fear. Inertia.”

He nodded. “When I do it, there’ll be no half measures. No

being rescued, no waking up in a hospital later.”

“You mean to do it?”

“The day I realize I’ve started to drift. Thank God we get some warning.”

“Not necessarily.”

“Yes, we do. I’ve done a lot of reading. Even talked to a couple of doctors. Don’t believe the rumors non-DGDs invent.”

I looked away, stared into the scarred, empty fireplace. I told him exactly how my father had died—something else I’d never voluntarily told anyone.

He sighed. “Jesus!”

We looked at each other.

“What are you going to do?” he asked.

“I don’t know.”

He extended a dark, square hand, and I took it and moved closer to him. He was a dark, square man—my height, half again my weight, and none of it fat. He was so bitter sometimes, he scared me.

“My mother started to drift when I was three,” he said. “My father only lasted a few months longer. I heard he died a couple of years after he went into the hospital. If the two of them had had any sense, they would have had me aborted the minute my mother realized she was pregnant. But she wanted a kid no matter what. And she was Catholic.” He shook his head. “Hell, they should pass a law to sterilize the lot of us.”

“They?” I said.

“You want kids?”

“No, but—”

“More like us to wind up chewing their fingers off in some DGD ward.”

“I don’t want kids, but I don’t want someone else telling me I can’t have any.”

He stared at me until I began to feel stupid and defensive. I moved away from him.

“Do you want someone else telling you what to do with your body?” I asked.

“No need,” he said. “I had that taken care of as soon as I was old enough.”

This left me staring. I’d thought about sterilization. What DGD hasn’t? But I didn’t know anyone else our age who had actually gone through with it. That would be like killing part of yourself—even though it wasn’t a part you intended to use. Killing part of yourself when so much of you was already dead.

“The damned disease could be wiped out in one generation,” he said, “but people are still animals when it comes to breeding. Still following mindless urges, like dogs and cats.”

My impulse was to get up and go away, leave him to wallow in his bitterness and depression alone. But I stayed. He seemed to want to live even less than I did. I wondered how he’d made it this far.

“Are you looking forward to doing research?” I probed. “Do you believe you’ll be able to—”

“No.”

I blinked. The word was as cold and dead a sound as I’d ever heard.

“I don’t believe in anything,” he said.

I took him to bed. He was the only other double DGD I had ever met, and if nobody did anything for him, he wouldn’t last

much longer. I couldn't just let him slip away. For a while, maybe we could be each other's reasons for staying alive.

He was a good student—for the same reason I was. And he seemed to shed some of his bitterness as time passed. Being around him helped me understand why, against all sanity, two DGDs would lock in on each other and start talking about marriage. Who else would have us?

We probably wouldn't last very long, anyway. These days, most DGDs make it to forty, at least. But then, most of them don't have two DGD parents. As bright as Alan was, he might not get into medical school because of his double inheritance. No one would tell him his bad genes were keeping him out, of course, but we both knew what his chances were. Better to train doctors who were likely to live long enough to put their training to use.

Alan's mother had been sent to Dilg. He hadn't seen her or been able to get any information about her from his grandparents while he was at home. By the time he left for college, he'd stopped asking questions. Maybe it was hearing about my parents that made him start again. I was with him when he called Dilg. Until that moment, he hadn't even known whether his mother was still alive. Surprisingly, she was.

"Dilg must be good," I said when he hung up. "People don't usually... I mean..."

"Yeah, I know," he said. "People don't usually live long once they're out of control. Dilg is different." We had gone to my room, where he turned a chair backward and sat down. "Dilg is what the others ought to be, if you can believe the literature."

"Dilg is a giant DGD ward," I said. "It's richer—probably better at sucking in the donations—and it's run by people who can expect to become patients eventually. Apart from that, what's different?"

"I've read about it," he said. "So should you. They've got

some new treatment. They don't just shut people away to die the way the others do."

"What else is there to do with them? With us?"

"I don't know. It sounded like they have some kind of... sheltered workshop. They've got patients doing things."

"A new drug to control the self-destructiveness?"

"I don't think so. We would have heard about that."

"What else could it be?"

"I'm going up to find out. Will you come with me?"

"You're going up to see your mother."

He took a ragged breath. "Yeah. Will you come with me?"

I went to one of my windows and stared out at the weeds. We let them thrive in the backyard. In the front we mowed them, along with the few patches of grass.

"I told you my DGD-ward experience."

"You're not fifteen now. And Dilg isn't some zoo of a ward."

"It's got to be, no matter what they tell the public. And I'm not sure I can stand it."

He got up, came to stand next to me. "Will you try?"

I didn't say anything. I focused on our reflections in the window glass—the two of us together. It looked right, felt right. He put his arm around me, and I leaned back against him. Our being together had been as good for me as it seemed to have been for him. It had given me something to go on besides inertia and fear. I knew I would go with him. It felt like the right thing to do.

"I can't say how I'll act when we get there," I said.

"I can't say how I'll act, either," he admitted. "Especially... when I see her."

He made the appointment for the next Saturday afternoon. You make appointments to go to Dilg unless you're a government inspector of some kind. That is the custom, and Dilg gets away with it.

We left L.A. in the rain early Saturday morning. Rain followed us off and on up the coast as far as Santa Barbara. Dilg was hidden away in the hills not far from San Jose. We could have reached it faster by driving up I-5, but neither of us were in the mood for all that bleakness. As it was, we arrived at one P.M. to be met by two armed gate guards. One of these phoned the main building and verified our appointment. Then the other took the wheel from Alan.

“Sorry,” he said. “But no one is permitted inside without an escort. We’ll meet your guide at the garage.”

None of this surprised me. Dilg is a place where not only the patients but much of the staff has DGD. A maximum security prison wouldn't have been as potentially dangerous. On the other hand, I'd never heard of anyone getting chewed up here. Hospitals and rest homes had accidents. Dilg didn't. It was beautiful—an old estate. One that didn't make sense in these days of high taxes. It had been owned by the Dilg family. Oil, chemicals, pharmaceuticals. Ironically, they had even owned part of the late, unlamented Hedeon Laboratories. They'd had a briefly profitable interest in Hedeonco: the magic bullet, the cure for a large percentage of the world's cancer and a number of serious viral diseases—and the cause of Duryea-Gode disease. If one of your parents was treated with Hedeonco and you were conceived after the treatments, you had DGD. If you had kids, you passed it on to them. Not everyone was equally affected. They didn't all commit suicide or murder, but they all mutilated themselves to some degree if they could. And they all drifted—went off into a world of their own and stopped responding to their surroundings.

Anyway, the only Dilg son of his generation had had his life

saved by Hedeonco. Then he had watched four of his children die before Doctors Kenneth Duryea and Jan Gode came up with a decent understanding of the problem and a partial solution: the diet. They gave Richard Dilg a way of keeping his next two children alive. He gave the big, cumbersome estate over to the care of DGD patients.

So the main building was an elaborate old mansion. There were other, newer buildings, more like guest houses than institutional buildings. And there were wooded hills all around. Nice country. Green. The ocean wasn't far away. There was an old garage and a small parking lot. Waiting in the lot was a tall, old woman. Our guard pulled up near her, let us out, then parked the car in the half-empty garage.

"Hello," the woman said, extending her hand. "I'm Beatrice Alcantara." The hand was cool and dry and startlingly strong. I thought the woman was DGD, but her age threw me. She appeared to be about sixty, and I had never seen a DGD that old. I wasn't sure why I thought she was DGD. If she was, she must have been an experimental model—one of the first to survive.

"Is it Doctor or Ms.?" Alan asked.

"It's Beatrice," she said. "I am a doctor, but we don't use titles much here."

I glanced at Alan, was surprised to see him smiling at her. He tended to go a long time between smiles. I looked at Beatrice and couldn't see anything to smile about. As we introduced ourselves, I realized I didn't like her. I couldn't see any reason for that either, but my feelings were my feelings. I didn't like her.

"I assume neither of you have been here before," she said, smiling down at us. She was at least six feet tall, and straight.

We shook our heads. "Let's go in the front way, then. I want to prepare you for what we do here. I don't want you to believe you've come to a hospital."

I frowned at her, wondering what else there was to believe. Dilg was called a retreat, but what difference did names make?

The house close up looked like one of the old-style public buildings—massive, baroque front with a single domed tower reaching three stories above the three-story house. Wings of the house stretched for some distance to the right and left of the tower, then cornered and stretched back twice as far. The front doors were huge—one set of wrought iron and one of heavy wood. Neither appeared to be locked. Beatrice pulled open the iron door, pushed the wooden one, and gestured us in.

Inside, the house was an art museum—huge, high ceilinged, tile floored. There were marble columns and niches in which sculptures stood or paintings hung. There were other sculptures displayed around the rooms. At one end of the rooms there was a broad staircase leading up to a gallery that went around the rooms. There more art was displayed. “All this was made here,” Beatrice said. “Some of it is even sold from here. Most goes to galleries in the Bay Area or down around L.A. Our only problem is turning out too much of it.”

“You mean the patients do this?” I asked.

The old woman nodded. “This and much more. Our people work instead of tearing at themselves or staring into space. One of them invented the p.v. locks that protect this place. Though I almost wish he hadn’t. It’s gotten us more government attention than we like.”

“What kind of locks?” I asked.

“Sorry. Palmprint-voiceprint. The first and the best. We have the patent.” She looked at Alan. “Would you like to see what your mother does?”

“Wait a minute,” he said. “You’re telling us out-of-control DGDs create art and invent things?”

“And that lock,” I said. “I’ve never heard of anything like that. I didn’t even see a lock.”

“The lock is new,” she said. “There have been a few news stories about it. It’s not the kind of thing most people would buy for their homes. Too expensive. So it’s of limited interest. People tend to look at what’s done at Dilg in the way they look at the efforts of idiots savants. Interesting, incomprehensible, but not really important. Those likely to be interested in the lock and able to afford it know about it.” She took a deep breath, faced Alan again. “Oh, yes, DGDs create things. At least they do here.”

“Out-of-control DGDs.”

“Yes.”

“I expected to find them weaving baskets or something—at best. I know what DGD wards are like.”

“So do I,” she said. “I know what they’re like in hospitals, and I know what it’s like here.” She waved a hand toward an abstract painting that looked like a photo I had once seen of the Orion Nebula. Darkness broken by a great cloud of light and color. “Here we can help them channel their energies. They can create something beautiful, useful, even something worthless. But they create. They don’t destroy.”

“Why?” Alan demanded. “It can’t be some drug. We would have heard.”

“It’s not a drug.”

“Then what is it? Why haven’t other hospitals—?”

“Alan,” she said. “Wait.”

He stood frowning at her.

“Do you want to see your mother?”

“Of course I want to see her!”

“Good. Come with me. Things will sort themselves out.”

She led us to a corridor past offices where people talked to one another, waved to Beatrice, worked with computers... They could have been anywhere. I wondered how many of them were controlled DGDs. I also wondered what kind of game the old woman was playing with her secrets. We passed through rooms so beautiful and perfectly kept it was obvious they were rarely used. Then at a broad, heavy door, she stopped us.

“Look at anything you like as we go on,” she said. “But don’t touch anything or anyone. And remember that some of the people you’ll see injured themselves before they came to us. They still bear the scars of those injuries. Some of those scars may be difficult to look at, but you’ll be in no danger. Keep that in mind. No one here will harm you.” She pushed the door open and gestured us in.

Scars didn’t bother me much. Disability didn’t bother me. It was the act of self-mutilation that scared me. It was someone attacking her own arm as though it were a wild animal. It was someone who had torn at himself and been restrained or drugged off and on for so long that he barely had a recognizable human feature left, but he was still trying with what he did have to dig into his own flesh. Those are a couple of the things I saw at the DGD ward when I was fifteen. Even then I could have stood it better if I hadn’t felt I was looking into a kind of temporal mirror.

I wasn’t aware of walking through that doorway. I wouldn’t have thought I could do it. The old woman said something, though, and I found myself on the other side of the door with the door closing behind me. I turned to stare at her.

She put her hand on my arm. “It’s all right,” she said quietly. “That door looks like a wall to a great many people.”

I backed away from her, out of her reach, repelled by her touch. Shaking hands had been enough, for God’s sake.

Something in her seemed to come to attention as she watched

me. It made her even straighter. Deliberately, but for no apparent reason, she stepped toward Alan, touched him the way people do sometimes when they brush past—a kind of tactile “Excuse me.” In that wide, empty corridor, it was totally unnecessary. For some reason, she wanted to touch him and wanted me to see. What did she think she was doing? Flirting at her age? I glared at her, found myself suppressing an irrational urge to shove her away from him. The violence of the urge amazed me.

Beatrice smiled and turned away. “This way,” she said. Alan put his arm around me and tried to lead me after her.

“Wait a minute,” I said, not moving.

Beatrice glanced around.

“What just happened?” I asked. I was ready for her to lie—to say nothing happened, pretend not to know what I was talking about.

“Are you planning to study medicine?” she asked.

“What? What does that have to do—?”

“Study medicine. You may be able to do a great deal of good.” She strode away, taking long steps so that we had to hurry to keep up. She led us through a room in which some people worked at computer terminals and others with pencils and paper. It would have been an ordinary scene except that some people had half their faces ruined or had only one hand or leg or had other obvious scars. But they were all in control now. They were working. They were intent but not intent on self-destruction. Not one was digging into or tearing away flesh. When we had passed through this room and into a small, ornate sitting room, Alan grasped Beatrice’s arm.

“What is it?” he demanded. “What do you do for them?”

She patted his hand, setting my teeth on edge. “I will tell you,” she said. “I want you to know. But I want you to see your

mother first.” To my surprise, he nodded, let it go at that.

“Sit a moment,” she said to us.

We sat in comfortable, matching upholstered chairs—Alan looking reasonably relaxed. What was it about the old lady that relaxed him but put me on edge? Maybe she reminded him of his grandmother or something. She didn’t remind me of anyone. And what was that nonsense about studying medicine?

“I wanted you to pass through at least one workroom before we talked about your mother—and about the two of you.” She turned to face me. “You’ve had a bad experience at a hospital or a rest home?”

I looked away from her, not wanting to think about it. Hadn’t the people in that mock office been enough of a reminder? Horror film office. Nightmare office.

“It’s all right,” she said. “You don’t have to go into detail. Just outline it for me.”

I obeyed slowly, against my will, all the while wondering why I was doing it.

She nodded, unsurprised. “Harsh, loving people, your parents. Are they alive?”

“No.”

“Were they both DGD?”

“Yes, but... yes.”

“Of course, aside from the obvious ugliness of your hospital experience and its implications for the future, what impressed you about the people in the ward?”

I didn’t know what to answer. What did she want? Why did she want anything from me? She should have been concerned with Alan and his mother.

“Did you see people unrestrained?”

“Yes,” I whispered. “One woman. I don’t know how it happened that she was free. She ran up to us and slammed into my father without moving him. He was a big man. She bounced off, fell, and... began tearing at herself. She bit her own arm and... swallowed the flesh she’d bitten away. She tore at the wound she’d made with the nails of her other hand. She... I screamed at her to stop.” I hugged myself, remembering the young woman, bloody, cannibalizing herself as she lay at our feet, digging into her own flesh. Digging. “They try so hard, fight so hard to get out.”

“Out of what?” Alan demanded.

I looked at him, hardly seeing him.

“Lynn,” he said gently. “Out of what?”

I shook my head. “Their restraints, their disease, the ward, their bodies...”

He glanced at Beatrice, then spoke to me again. “Did the girl talk?”

“No. She screamed.”

He turned away from me uncomfortably. “Is this important?” he asked Beatrice.

“Very,” she said.

“Well... can we talk about it after I see my mother?”

“Then and now.” She spoke to me. “Did the girl stop what she was doing when you told her to?”

“The nurses had her a moment later. It didn’t matter.”

“It mattered. Did she stop?”

“Yes.”

“According to the literature, they rarely respond to anyone,”

Alan said.

“True.” Beatrice gave him a sad smile. “Your mother will probably respond to you, though.”

“Is she?...” He glanced back at the nightmare office. “Is she as controlled as those people?”

“Yes, though she hasn’t always been. Your mother works with clay now. She loves shapes and textures and—”

“She’s blind,” Alan said, voicing the suspicion as though it were fact. Beatrice’s words had sent my thoughts in the same direction. Beatrice hesitated. “Yes,” she said finally. “And for... the usual reason. I had intended to prepare you slowly.”

“I’ve done a lot of reading.”

I hadn’t done much reading, but I knew what the usual reason was. The woman had gouged, ripped, or otherwise destroyed her eyes. She would be badly scarred. I got up, went over to sit on the arm of Alan’s chair. I rested my hand on his shoulder, and he reached up and held it there.

“Can we see her now?” he asked.

Beatrice got up. “This way,” she said.

We passed through more workrooms. People painted; assembled machinery; sculpted in wood, stone; even composed and played music. Almost no one noticed us. The patients were true to their disease in that respect. They weren’t ignoring us. They clearly didn’t know we existed. Only the few controlled-DGD guards gave themselves away by waving or speaking to Beatrice. I watched a woman work quickly, knowledgeably, with a power saw. She obviously understood the perimeters of her body, was not so dissociated as to perceive herself as trapped in something she needed to dig her way out of. What had Dilg done for these people that other hospitals did not do? And how could Dilg withhold its treatment from the others?

“Over there we make our own diet foods,” Beatrice said, pointing through a window toward one of the guest houses. “We permit more variety and make fewer mistakes than the commercial preparers. No ordinary person can concentrate on work the way our people can.”

I turned to face her. “What are you saying? That the bigots are right? That we have some special gift?”

“Yes,” she said. “It’s hardly a bad characteristic, is it?”

“It’s what people say whenever one of us does well at something. It’s their way of denying us credit for our work.”

“Yes. But people occasionally come to the right conclusions for the wrong reasons.” I shrugged, not interested in arguing with her about it.

“Alan?” she said. He looked at her.

“Your mother is in the next room.”

He swallowed, nodded. We both followed her into the room.

Naomi Chi was a small woman, hair still dark, fingers long and thin, graceful as they shaped the clay. Her face was a ruin. Not only her eyes but most of her nose and one ear were gone. What was left was badly scarred. “Her parents were poor,” Beatrice said. “I don’t know how much they told you, Alan, but they went through all the money they had, trying to keep her at a decent place. Her mother felt so guilty, you know. She was the one who had cancer and took the drug... Eventually, they had to put Naomi in one of those state-approved, custodial-care places. You know the kind. For a while, it was all the government would pay for. Places like that... well, sometimes if patients were really troublesome—especially the ones who kept breaking free—they’d put them in a bare room and let them finish themselves. The only things those places took good care of were the maggots, the cockroaches, and the rats.”

I shuddered. “I’ve heard there are still places like that.”

“There are,” Beatrice said, “kept open by greed and indifference.” She looked at Alan. “Your mother survived for three months in one of those places. I took her from it myself. Later I was instrumental in having that particular place closed.”

“You took her?” I asked.

“Dilg didn’t exist then, but I was working with a group of controlled DGDs in L.A. Naomi’s parents heard about us and asked us to take her. A lot of people didn’t trust us then. Only a few of us were medically trained. All of us were young, idealistic, and ignorant. We began in an old frame house with a leaky roof. Naomi’s parents were grabbing at straws. So were we. And by pure luck, we grabbed a good one. We were able to prove ourselves to the Dilg family and take over these quarters.”

“Prove what?” I asked.

She turned to look at Alan and his mother. Alan was staring at Naomi’s ruined face, at theropy, discolored scar tissue. Naomi was shaping the image of an old woman and two children. The gaunt, lined face of the old woman was remarkably vivid—detailed in a way that seemed impossible for a blind sculptress.

Naomi seemed unaware of us. Her total attention remained on her work. Alan forgot about what Beatrice had told us and reached out to touch the scarred face.

Beatrice let it happen. Naomi did not seem to notice. “If I get her attention for you,” Beatrice said, “we’ll be breaking her routine. We’ll have to stay with her until she gets back into it without hurting herself. About half an hour.”

“You can get her attention?” he asked.

“Yes.”

“Can she?...” Alan swallowed. “I’ve never heard of anything like this. Can she talk?”

“Yes. She may not choose to, though. And if she does, she’ll do it very slowly.”

“Do it. Get her attention.”

“She’ll want to touch you.”

“That’s all right. Do it.”

Beatrice took Naomi’s hands and held them still, away from the wet clay. For several seconds Naomi tugged at her captive hands, as though unable to understand why they did not move as she wished.

Beatrice stepped closer and spoke quietly. “Stop, Naomi.” And Naomi was still, blind face turned toward Beatrice in an attitude of attentive waiting. Totally focused waiting.

“Company, Naomi.”

After a few seconds, Naomi made a wordless sound.

Beatrice gestured Alan to her side, gave Naomi one of his hands. It didn’t bother me this time when she touched him. I was too interested in what was happening. Naomi examined Alan’s hand minutely, then followed the arm up to the shoulder, the neck, the face. Holding his face between her hands, she made a sound. It may have been a word, but I couldn’t understand it. All I could think of was the danger of those hands. I thought of my father’s hands.

“His name is Alan Chi, Naomi. He’s your son.” Several seconds passed.

“Son?” she said. This time the word was quite distinct, though her lips had split in many places and had healed badly. “Son?” she repeated anxiously. “Here?”

“He’s all right, Naomi. He’s come to visit.”

“Mother?” he said.

She reexamined his face. He had been three when she started to drift. It didn't seem possible that she could find anything in his face that she would remember. I wondered whether she remembered she had a son.

"Alan?" she said. She found his tears and paused at them. She touched her own face where there should have been an eye, then she reached back toward his eyes. An instant before I would have grabbed her hand, Beatrice did it.

"No!" Beatrice said firmly.

The hand fell limply to Naomi's side. Her face turned toward Beatrice like an antique weather vane swinging around. Beatrice stroked her hair, and Naomi said something I almost understood. Beatrice looked at Alan, who was frowning and wiping away tears.

"Hug your son," Beatrice said softly.

Naomi turned, groping, and Alan seized her in a tight, long hug. Her arms went around him slowly. She spoke words blurred by her ruined mouth but just understandable.

"Parents?" she said. "Did my parents... care for you?" Alan looked at her, clearly not understanding.

"She wants to know whether her parents took care of you," I said.

He glanced at me doubtfully, then looked at Beatrice.

"Yes," Beatrice said. "She just wants to know that they cared for you."

"They did," he said. "They kept their promise to you, Mother."

Several seconds passed. Naomi made sounds that even Alan took to be weeping, and he tried to comfort her.

"Who else is here?" she said finally.

This time Alan looked at me. I repeated what she had said.

“Her name is Lynn Mortimer,” he said. “I’m...” He paused awkwardly. “She and I are going to be married.”

After a time, she moved back from him and said my name. My first impulse was to go to her. I wasn’t afraid or repelled by her now, but for no reason I could explain, I looked at Beatrice.

“Go,” she said. “But you and I will have to talk later.”

I went to Naomi, took her hand.

“Bea?” she said.

“I’m Lynn,” I said softly.

She drew a quick breath. “No,” she said. “No, you’re...”

“I’m Lynn. Do you want Bea? She’s here.”

She said nothing. She put her hand to my face, explored it slowly. I let her do it, confident that I could stop her if she turned violent. But first one hand, then both, went over me very gently.

“You’ll marry my son?” she said finally.

“Yes.”

“Good. You’ll keep him safe.”

As much as possible, we’ll keep each other safe. “Yes,” I said.

“Good. No one will close him away from himself. No one will tie him or cage him.” Her hand wandered to her own face again, nails biting in slightly.

“No,” I said softly, catching the hand. “I want you to be safe, too.”

The mouth moved. I think it smiled. “Son?” she said.

He understood her, took her hand.

“Clay,” she said. Lynn and Alan in clay. “Bea?”

“Of course,” Beatrice said. “Do you have an impression?”

“No!” It was the fastest that Naomi had answered anything. Then, almost childlike, she whispered. “Yes.”

Beatrice laughed. “Touch them again if you like, Naomi. They don’t mind.”

We didn’t. Alan closed his eyes, trusting her gentleness in a way I could not. I had no trouble accepting her touch, even so near my eyes, but I did not delude myself about her. Her gentleness could turn in an instant. Naomi’s fingers twitched near Alan’s eyes, and I spoke up at once, out of fear for him.

“Just touch him, Naomi. Only touch.”

She froze, made an interrogative sound.

“She’s all right,” Alan said.

“I know,” I said, not believing it. He would be all right, though, as long as someone watched her very carefully, nipped any dangerous impulses in the bud.

“Son!” she said, happily possessive. When she let him go, she demanded clay, wouldn’t touch her old-woman sculpture again. Beatrice got new clay for her, leaving us to soothe her and ease her impatience. Alan began to recognize signs of impending destructive behavior. Twice he caught her hands and said no. She struggled against him until I spoke to her. As Beatrice returned, it happened again, and Beatrice said, “No, Naomi.” Obediently Naomi let her hands fall to her sides.

“What is it?” Alan demanded later when we had left Naomi safely, totally focused on her new work—clay sculptures of us. “Does she only listen to women or something?”

Beatrice took us back to the sitting room, sat us both down, but did not sit down herself. She went to a window and stared out.

“Naomi only obeys certain women,” she said. “And she’s sometimes slow to obey. She’s worse than most—probably because of the damage she managed to do to herself before I got her.” Beatrice faced us, stood biting her lip and frowning. “I haven’t had to give this particular speech for a while,” she said. “Most DGDs have the sense not to marry each other and produce children. I hope you two aren’t planning to have any—in spite of our need.” She took a deep breath. “It’s a pheromone. A scent. And it’s sex-linked. Men who inherit the disease from their fathers have no trace of the scent. They also tend to have an easier time with the disease. But they’re useless to use as staff here. Men who inherit from their mothers have as much of the scent as men get. They can be useful here because the DGDs can at least be made to notice them. The same for women who inherit from their mothers but not their fathers. It’s only when two irresponsible DGDs get together and produce girl children like me or Lynn that you get someone who can really do some good in a place like this.” She looked at me. “We are very rare commodities, you and I. When you finish school you’ll have a very well-paying job waiting for you.”

“Here?” I asked.

“For training, perhaps. Beyond that, I don’t know. You’ll probably help start a retreat in some other part of the country. Others are badly needed.” She smiled humorlessly. “People like us don’t get along well together. You must realize that I don’t like you any more than you like me.”

I swallowed, saw her through a kind of haze for a moment. Hated her mindlessly—just for a moment.

“Sit back,” she said. “Relax your body. It helps.”

I obeyed, not really wanting to obey her but unable to think of anything else to do. Unable to think at all. “We seem,” she said, “to be very territorial. Dilg is a haven for me when I’m the only one of my kind here. When I’m not, it’s a prison.”

“All it looks like to me is an unbelievable amount of work,” Alan said.

She nodded. “Almost too much.” She smiled to herself. “I was one of the first double DGDs to be born. When I was old enough to understand, I thought I didn’t have much time. First I tried to kill myself. Failing that, I tried to cram all the living I could into the small amount of time I assumed I had. When I got into this project, I worked as hard as I could to get it into shape before I started to drift. By now I wouldn’t know what to do with myself if I weren’t working.”

“Why haven’t you... drifted?” I asked.

“I don’t know. There aren’t enough of our kind to know what’s normal for us.”

“Drifting is normal for every DGD sooner or later.”

“Later, then.”

“Why hasn’t the scent been synthesized?” Alan asked. “Why are there still concentration-camp rest homes and hospital wards?”

“There have been people trying to synthesize it since I proved what I could do with it. No one has succeeded so far. All we’ve been able to do is keep our eyes open for people like Lynn.” She looked at me. “Dilg scholarship, right?”

“Yeah. Offered out of the blue.”

“My people do a good job keeping track. You would have been contacted just before you graduated or if you dropped out.”

“Is it possible,” Alan said, staring at me, “that she’s already doing it? Already using the scent to... influence people?”

“You?” Beatrice asked.

“All of us. A group of DGDs. We all live together. We’re all controlled, of course, but...” Beatrice smiled. “It’s probably the quietest house full of kids that anyone’s ever seen.”

I looked at Alan, and he looked away. “I’m not doing anything to them,” I said. “I remind them of work they’ve already promised to do. That’s all.”

“You put them at ease,” Beatrice said. “You’re there. You... well, you leave your scent around the house. You speak to them individually. Without knowing why, they no doubt find that very comforting. Don’t you, Alan?”

“I don’t know,” he said. “I suppose I must have. From my first visit to the house, I knew I wanted to move in. And when I first saw Lynn, I...” He shook his head. “Funny, I thought all that was my idea.”

“Will you work with us, Alan?”

“Me? You want Lynn.”

“I want you both. You have no idea how many people take one look at one workroom here and turn and run. You may be the kind of young people who ought to eventually take charge of a place like Dilg.”

“Whether we want to or not, eh?” he said.

Frightened, I tried to take his hand, but he moved it away. “Alan, this works,” I said. “It’s only a stopgap, I know. Genetic engineering will probably give us the final answers, but for God’s sake, this is something we can do now!”

“It’s something *you* can do. Play queen bee in a retreat full of workers. I’ve never had any ambition to be a drone.”

“A physician isn’t likely to be a drone,” Beatrice said.

“Would you marry one of your patients?” he demanded. “That’s what Lynn would be doing if she married me—whether I become a doctor or not.”

She looked away from him, stared across the room. “My husband is here,” she said softly. “He’s been a patient here for

almost a decade. What better place for him... when his time came?"

"Shit!" Alan muttered. He glanced at me. "Let's get out of here!" He got up and strode across the room to the door, pulled at it, then realized it was locked. He turned to face Beatrice, his body language demanding she let him out. She went to him, took him by the shoulder, and turned him to face the door. "Try it once more," she said quietly. "You can't break it. Try."

Surprisingly, some of the hostility seemed to go out of him. "This is one of those p.v. locks?" he asked.

"Yes."

I set my teeth and looked away. Let her work. She knew how to use this thing she and I both had. And for the moment, she was on my side.

I heard him make some effort with the door. The door didn't even rattle. Beatrice took his hand from it, and with her own hand flat against what appeared to be a large brass knob, she pushed the door open.

"The man who created that lock is nobody in particular," she said. "He doesn't have an unusually high I.Q., didn't even finish college. But sometime in his life he read a science-fiction story in which palmprint locks were a given. He went that story one better by creating one that responded to voice or palm. It took him years, but we were able to give him those years. The people of Dilg are problem solvers, Alan. Think of the problems you could solve!"

He looked as though he were beginning to think, beginning to understand. "I don't see how biological research can be done that way," he said. "Not with everyone acting on his own, not even aware of other researchers and their work."

"It *is* being done," she said, "and not in isolation. Our retreat in Colorado specializes in it and has—just barely—enough trained,

controlled DGDs to see that no one really works in isolation. Our patients can still read and write—those who haven't damaged themselves too badly. They can take each other's work into account if reports are made available to them. And they can read material that comes in from the outside. They're working, Alan. The disease hasn't stopped them, *won't* stop them." He stared at her, seemed to be caught by her intensity—or her scent. He spoke as though his words were a strain, as though they hurt his throat. "I won't be a puppet. I won't be controlled... by a goddamn smell!"

"Alan—"

"I won't be what my mother is. I'd rather be dead!"

"There's no reason for you to become what your mother is."

He drew back in obvious disbelief.

"Your mother is brain damaged—thanks to the three months she spent in that custodial-care toilet. She had no speech at all when I met her. She's improved more than you can imagine. None of that has to happen to you. Work with us, and we'll see that none of it happens to you."

He hesitated, seemed less sure of himself. Even that much flexibility in him was surprising. "I'll be under your control or Lynn's," he said.

She shook her head. "Not even your mother is under my control. She's aware of me. She's able to take direction from me. She trusts me the way any blind person would trust her guide."

"There's more to it than that."

"Not here. Not at any of our retreats."

"I don't believe you."

"Then you don't understand how much individuality our people retain. They know they need help, but they have minds of their own. If you want to see the abuse of power you're worried

about, go to a DGD ward.”

“You’re better than that, I admit. Hell is probably better than that. But...”

“But you don’t trust us.”

He shrugged.

“You do, you know.” She smiled. “You don’t want to, but you do. That’s what worries you, and it leaves you with work to do. Look into what I’ve said. See for yourself. We offer DGDs a chance to live and do whatever they decide is important to them. What do you have, what can you realistically hope for that’s better than that?”

Silence. “I don’t know what to think,” he said finally.

“Go home,” she said. “Decide what to think. It’s the most important decision you’ll ever make.”

He looked at me. I went to him, not sure how he’d react, not sure he’d want me no matter what he decided.

“What are you going to do?” he asked.

The question startled me. “You have a choice,” I said. “I don’t. If she’s right... how could I not wind up running a retreat?”

“Do you want to?”

I swallowed. I hadn’t really faced that question yet. Did I want to spend my life in something that was basically a refined DGD ward? “No!”

“But you will.”

“...Yes.” I thought for a moment, hunted for the right words. “You’d do it.”

“What?”

“If the pheromone were something only men had, you would

do it.”

That silence again. After a time he took my hand, and we followed Beatrice out to the car. Before I could get in with him and our guard-escort, she caught my arm. I jerked away reflexively. By the time I caught myself, I had swung around as though I meant to hit her. Hell, I did mean to hit her, but I stopped myself in time. “Sorry,” I said with no attempt at sincerity.

She held out a card until I took it. “My private number,” she said. “Before seven or after nine, usually. You and I will communicate best by phone.”

I resisted the impulse to throw the card away. God, she brought out the child in me.

Inside the car, Alan said something to the guard. I couldn’t hear what it was, but the sound of his voice reminded me of him arguing with her—her logic and her scent. She had all but won him for me, and I couldn’t manage even token gratitude. I spoke to her, low voiced.

“He never really had a chance, did he?”

She looked surprised. “That’s up to you. You can keep him or drive him away. I assure you, you *can* drive him away.”

“How?”

“By imagining that he doesn’t have a chance.” She smiled faintly. “Phone me from your territory. We have a great deal to say to each other, and I’d rather we didn’t say it as enemies.”

She had lived with meeting people like me for decades. She had good control. I, on the other hand, was at the end of my control. All I could do was scramble into the car and floor my own phantom accelerator as the guard drove us to the gate. I couldn’t look back at her. Until we were well away from the house, until we’d left the guard at the gate and gone off the property, I couldn’t make myself look back. For long, irrational minutes, I was

convinced that somehow if I turned, I would see myself standing there, gray and old, growing small in the distance, vanishing.

Afterword

“The Evening and the Morning and the Night” grew from my ongoing fascinations with biology, medicine, and personal responsibility.

In particular, I began the story wondering how much of what we do is encouraged, discouraged, or otherwise guided by what we are genetically. This is one of my favorite questions, parent to several of my novels. It can be a dangerous question. All too often, when people ask it, they mean who has the biggest or the best or the most of whatever they see as desirable, or who has the smallest and the least of what is undesirable. Genetics as a board game, or worse, as an excuse for the social Darwinism that swings into popularity every few years. Nasty habit.

And yet the question itself is fascinating. And disease, grim as it is, is one way to explore answers. Genetic disorders in particular may teach us much about who and what we are.

I built Duryea-Gode disease from elements of three genetic disorders. The first is Huntington’s disease—hereditary, dominant, and thus an inevitability if one has the gene for it. And it is caused by only one abnormal gene. Also Huntington’s does not usually show itself until its sufferers are middle-aged.

In addition to Huntington’s, I used phenylketonuria (PKU), a recessive genetic disorder that causes severe mental impairment unless the infant who has it is put on a special diet.

Finally, I used Lesch-Nyhan disease, which causes both mental impairment and self-mutilation.

To elements of these disorders, I added my own particular twists: a sensitivity to pheromones and the sufferers' persistent delusion that they are trapped, imprisoned within their own flesh, and that that flesh is somehow not truly part of them. In that last, I took an idea familiar to us all—present in many religions and philosophies—and carried it to a terrible extreme.

We carry as many as 50,000 different genes in each of the nuclei of our billions of cells. If one gene among the 50,000, the Huntington's gene, for instance, can so greatly change our lives—what we can do, what we can become—then what are we?

What, indeed?

For readers who find this question as fascinating as I do, I offer a brief, unconventional reading list: *The Chimpanzees of Gombe: Patterns of Behavior* by Jane Goodall, *The Boy Who Couldn't Stop Washing: The Experience and Treatment of Obsessive-Compulsive Disorder* by Judith L. Rapoport, *Medical Detectives* by Berton Roueché, *An Anthropologist on Mars: Seven Paradoxical Tales* and *The Man Who Mistook His Wife for a Hat and Other Clinical Tales* by Oliver Sacks.

Enjoy!