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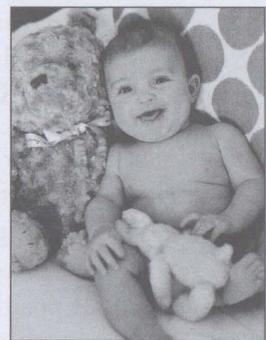
Texts for the Whole Self: Finding Knowledge *and* Comfort

by Leah van Belle

People who know my work as a teacher educator and professional development consultant will tell you how excited I get about artfully written nonfiction texts, be they informational or persuasive, and how passionate I am about using these kinds of texts as mentor texts to help K-12 students learn tools for comprehension and how to write their own well-crafted nonfiction. Nonfiction is such an essential resource and tool in our everyday lives, and I was excited to see the emphasis on it in the Common Core State Standards. I have spent the last few years helping teachers get excited about nonfiction so they can help kids get excited about it; however, the importance of nonfiction recently became real to me in a deeply personal and life-altering way, as I'm sure it has for many of you at different points in your life.



I found out that I was pregnant with my first child on Mother's Day of 2013. I was over the moon to become a mommy at last, and, like many new parents, devoured all the informational texts I could read about pregnancy. Everything went along smoothly and on January 2 I had my baby—a gorgeous little boy whom I named Langston Lyle Johannes van Belle, and with whom I fell head over heels in love. However, in the days after his birth, it became apparent that Langston was facing significant health challenges and what followed were months of anguish as I watched my baby struggle to breathe, eat, and sleep normally, and have to endure oh-so-many medical tests. I poured over test results from specialists and surgeons, research articles, and websites about such dreadful topics as laryngomalacia, vallecular cysts, failure to thrive, dysphagia, obstructive sleep apnea, and supraglottoplasty. If it weren't for all of the nonfiction texts I was able to access and read, I would not have been able to make informed medical decisions for my son and act as his health advocate. Langston needed surgery to remove a growth and open up his airway so he could breathe, feed, and sleep safely. Reading everything from literature reviews on the most effective methods of treating severe laryngomalacia, to how to place a nasogastric tube in my newborn, allowed me to construct the knowledge I needed to navigate medical choices and provide the best at-home care I could for Langston. I needed to learn things; I found texts that could help me learn; I read them; I learned; I applied my new knowledge. But that is only the cerebral side of the role texts played. Texts also served a very different purpose for me in those months of worry and fear.



From the very first day I knew I was going to be a mommy, I began buying books for Langston... after all, he was named after the poet Langston Hughes. A bookshelf was the first piece of furniture I bought for his nursery, and when my sister passed down a small wall-mounted bookshelf that she and I had painted and hung in my nephew's nursery eleven years ago, I cried. When I packed my bag for delivery, it included a ridiculous number of books to read to Langston in the hospital. I knew that I wanted books to be as big a part of his life as they have been of mine. A few hours after he was born, my mother read him his first book, *Good Night, Moon* by Margaret Wise Brown, and I read him *Shades of Black: A Celebration of Our Children* by Sandra Pinkney. In the days and months that followed, despite all of the chaos of having a very sick child and the almost daily appointments with specialists, Langston and I read books together. It was our calm in the storm. Reading to him gave me a sense of normalcy and created a little quiet space for the two of us—a space where he could simply be a beautiful new baby and I could be his adoring mommy, with all the medical worries set aside for a little while. When Langston had surgery to open his airway, he had to be heavily sedated and on a ventilator for several days until the swelling in his throat went down enough for him to breathe safely. As those of you who have watched your child hooked up to machines know, seeing your little one so small and fragile in the expanses of a hospital bed leaves you with the most overwhelming, helpless feeling. My motherly instinct was to hold him, rock him, and nurse him, but I could do none of those things. At that point it wasn't informational books to which I turned; it was fiction. I pulled up a chair next to Langston's bed and opened to the first page of a familiar and much-loved tale:

“Here is Edward Bear, coming downstairs now, bump, bump, bump, on the back of his head, behind Christopher Robin. It is, as far as he

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