

FROM GRIEF TO LOVE

WALKING AROUND ENGLAND AND WALES

LAURENCE CARTER

Copyright © Laurence Carter 2024

All rights reserved.

No part of this publication may be altered, reproduced, distributed, or transmitted in any form, by any means, including, but not limited to, scanning, duplicating, uploading, hosting, distributing, or reselling, without the express prior written permission of the publisher, except in the case of reasonable quotations in features such as reviews, interviews, and certain other non-commercial uses currently permitted by copyright law.

First published in 2024.

Published by Edward Marmalade Publishing.

ISBN: 978-1-7385315-0-9

CONTENTS

The Uses of Sorrow	ix
Author's Note.....	xi
Chapter 1	15
Chapter 2	19
Chapter 3	23
Chapter 4	29
The South	33
Chapter 5	35
Chapter 6	41
The Southwest.....	49
Chapter 7	51
Chapter 8	56
Chapter 9	61
Chapter 10	69
Chapter 11	75
Chapter 12	82
Chapter 13	86
Wales.....	95
Chapter 14	97

Chapter 15	102
Chapter 16	116
The Northwest	121
Chapter 17	123
Chapter 18	129
Hadrian's Wall and Northumberland	135
Chapter 19	137
Chapter 20	142
The Northeast	147
Chapter 21	149
Chapter 22	153
Chapter 23	158
Chapter 24	162
Chapter 25	169
The Wash.....	175
Chapter 26	177
East Anglia	181
Chapter 27	183
Essex and North Kent.....	187
Chapter 28	189
South Kent and East Sussex.....	193
Chapter 29	195

Chapter 30	198
Epilogue	201
Acknowledgments	203



Dedicated to Melitta Carter, an extraordinary woman,
who made many lives special.

You would have enjoyed this walk!

MAP OF THE WALK JUNE 16, 2018 – JUNE 23, 2019

START AND END: SEAFORD, EAST SUSSEX





CHAPTER 1

BEFORE GRIEF COMES LOVE

“There is never a time or place for true love. It happens accidentally, in a heartbeat, in a single flashing, throbbing moment.” — Nancy Mitford

Lilongwe, Malawi, July 1987

You know how they say your life can change in a moment? On a sunny, humid day in July 1987, I walked into a room in the Ministry of Agriculture in the southern African country of Malawi. I was a young transport economist advising the Malawian government on which rural roads to upgrade. I needed data; those roads that connected neighbourhoods growing more food would be prioritised. I strolled into the colonial-era, whitewashed building ringed by hibiscus bushes, the languid, humid warmth of the sunshine accompanying the smiles on the faces of the guards.

In the room, all seemed normal. A lopsided portrait of the president hung on the wall. A gentle breeze blew through the burglar bars, carrying a whiff of the fruit seller’s activities outside, perhaps banana or mango. Yellowing reports lay stacked

in the corners. I knew from experience that these discarded pages often served as paper cones for little boys selling peanuts in the street.

A young woman stood at the desk, a specialist in agricultural statistics, with dark curly hair, a bright yellow dress, and a beautiful smile. And, as I discovered later, strong opinions and a mean tennis backhand. She gave me the data, but soon our conversation turned to tennis. She and a girlfriend played doubles each week with a couple of guys. One was out of town. Could I join them that evening? That sounded much better than spreadsheeting crop information. They lowered their standards for me, and the four of us enjoyed a game vigorous enough to justify a beer afterwards.

As we dispersed, she asked if I could join a group on a weekend hiking trip. We trekked up Mount Mulanje in southern Malawi, where the rolling mist and waving ferns created an atmospheric, romantic mood. One of us helped the other over a rock; our hands remained clasped afterwards. Two years later, Melitta Alevropoulos and I married.

Looking back on our life together, we had no idea of our luck. We were blessed with three children. We lived in several African countries – Botswana, Malawi, and Swaziland – and the remote South Atlantic island of St. Helena. In 1993 we moved to Washington DC for my work in development.

Then, as the leaves were turning crispy gold and red in the Washington suburbs in October 2012, another life-changing moment occurred. I returned home from work, and Melitta said in a low, worried voice:

“Bad news. The results of my smear test came back. I have cervical cancer. The doctor says I need emergency surgery.”

The implications sank in as Melitta talked. I held her hand as she explained that everything depended on whether the doctors had found it early enough. This was my introduction to

the tyranny of time around testing for cancer: every week matters. We talked about the practicalities of preparing for the hospital. She fretted about the children. I hugged her to sleep that night, telling her how much I loved her, indeed how we all loved her.

That evening, we told Emily, 22, Nic, 20, and Georgie, 16.

Melitta spent the next few months enduring the trauma of chemotherapy and radiation. The doctors said that perhaps the cancer had not metastasised. We waited for the next MRI, hoping. A few months later, in July 2013, I travelled for my work in development to East Timor, on the opposite side of the world. Engrossed in typing emails, I took a few seconds to pick up the phone. In a small, far-away voice, Melitta said,

“Bad news, the cancer has metastasised; I have 12-18 months left.”

I couldn't see her face, hold her hand, or embrace her in a hug. Outside the open shutters, life proliferated. The bright mauve of the bougainvillea bush, the sickly, sweet fragrance of the frangipani tree, the song of the Timor dusky sparrow...

The call ended. I cried – for Melitta, for the graduations and weddings she would miss, the grandchildren she would never see, our children, and myself.

Two days later I arrived at the hospital, to hold her while she sobbed. I told Melitta that we would find some trials and prove the doctors wrong. I couldn't accept the diagnosis. She was more practical – as she had been throughout our marriage – and began planning.

In June 2014, a year after Melitta's 'no hope' diagnosis, the family travelled to St Andrews in Scotland, for Nic's graduation. Melitta was on a break from radiation and chemotherapy treatment and was strong enough to stroll along the beach, humming the melody from *Chariots of Fire*. She delighted in the crab pools and spotted a common redshank, but mostly watched

Emily, Nic and Georgie enjoying each other's company. We all knew this was her last graduation; she would miss Georgie's ceremony in 2018.

For twenty months Melitta managed through a mix of treatments, bouts of hope, and preparations for the family afterwards. Suddenly, in July 2015, the plunge began; the doctor told us that now he would simply prescribe pain medication. I drove home alone, turned the music up full, shouting, "No, no, no, why...".

Melitta died in early September in our family living room, surrounded by Emily, Nic, Georgie, me, and our two dogs. That morning she had lit up my heart with her smile for the last time. A lock of her dark, curly hair had fallen across her forehead, like on that first day in Lilongwe, Malawi. She was fifty-three years old.



CHAPTER 2

GRIEF

“The worst type of crying wasn’t the kind everyone could see – the wailing on street corners, the tearing at clothes. No, the worst kind happened when your soul wept and no matter what you did, there was no way to comfort it.” — Katie McGarry

Washington D.C., autumn 2015

The mundane filled the void. Emily, Nic, Georgie and I took the dogs for walks. We had a black and white Shih Tzu, Ella, and a golden-brown standard poodle, Cino. Little and large, bossy, and easy-going. Melitta had trained both well. The four of us would walk slowly, broken, and silent, around the familiar neighbourhood route. Summer’s heat and humidity had lingered into early September and the cicadas would announce the onset of evening. Cino kept looking back, searching in vain for his favourite person. We had walked dogs as a family, and Melitta and I as a couple, for over a decade. Now everything had changed.

On our walks a Gladys Knight song kept playing in my mind. When Melitta and I started dating, in the mid-1980s in Malawi, we would often take a picnic into the forest, lie on a blanket, inhaling the aroma of the conifers, and sing along to a

cassette of Motown songs, including *It Should Have Been Me*. Now, twenty-eight years later, I wished that she had been the one to survive. I found myself asking the same question several times a week *What would you do, Meloo?* I had ridden on the coattails of her decisiveness for nearly thirty years, and now needed to step up. Nowhere more so than with the children. Melitta had whispered to me several times in the past few weeks: make sure that Emily, Nic and Georgie are OK. They had each been close to Melitta, in the special way of mothers and their children. Emily and Melitta had battled sometimes over the life-stages all first-borns must navigate, both insisting they were right, and bonding again after the storm. Emily matched her mother in sociability and temperament, not to mention dark curls and a love for art. Melitta, who had been the middle child of three sisters, empathized with Nic's frustrations in dealing with his siblings. She fussed over him, insisting he learn the piano and later, when he played, would lie back on the sofa, eyes closed, delighting in the music made by her boy. Towards the end, Nic dug his mother a pond in the garden, a sonata with a spade. Melitta tried to protect Georgie from being teased or ignored by Emily and Nic, and sometimes did not notice when she deliberately provoked her big brother. Fair, unlike her dark-haired siblings, Georgie emulated her mother's kindness and empathy, but with a more placid nature.

I did not know how to assuage their pain. I was especially worried about Georgie, now nineteen, returning alone to university in Manchester, England. We agreed that the four of us would meet up as often as possible, and I scheduled a visit to see Georgie in October. But I knew, deep down, that although we would be there for each other, we would each walk the path of grief in our own way.

For weeks after Melitta passed away, waking up in the morning, half-asleep, I would throw my arm across the bed,

ready to snuggle up. A flat, chilly sheet, and an expanse of white emptiness, had replaced the cuddly, warm woman. This sequence would startle me awake, and I would lie still, eyes closed, a tear involuntarily slipping out, adrift in memories, resisting the realities of the day. Cino would only tolerate a few minutes however, before stamping his paws impatiently at the end of the bed. Breakfast trumped mourning.

Life resumed, an empty normal. Emily returned to work in New York, Georgie to university in Manchester and Nic stayed at home with me, as he was working in Washington. The kindnesses and suggestions piled up. Neighbours and friends cooked multiple meals for Nic and me and invited us to their homes. Three people gave me Joan Didion's *The Year of Magical Thinking*. Recommendations flooded in for therapy, meditation, yoga, and walking. In practice, both Nic and I veered towards losing ourselves in exercise. We rode our bikes to work in Washington along the canal, marvelling at the early morning mist hovering over the Potomac River. We trained for a triathlon. On Fridays he and I would have a beer and dinner together.

One day, at work, a few weeks after Melitta had passed away, a colleague asked whether I was ready to start dating again, assuring me that there were many women in their late forties and early fifties looking for men. Especially men who still had their hair and no beer belly, he added, trying to be helpful. I stared at him wordlessly, and walked away, unable to muster any response.

Nights were the worst; memories would intrude into dreams, transform into wakefulness, followed by aching, dry sobs, and eventually I would fall back into a fitful, half-awake sleep, waiting for dawn. I started to write to Melitta in a journal, rehashing a memory, or telling her about the day. It helped a little.

Later that autumn, on a drizzly November day, bereft of sunshine or meaning, I stumbled upon a piece of cloth that

Melitta had always slept with, covering her nose to limit her lifelong asthma. I smelled it, trying to coax her memory back, and stood there, wavering, tears streaming, weighing up giving it to Goodwill. *C'mon Laurence, pull yourself together, for the kids.* I gave it away, apologising to Melitta that evening in my journal. I sensed that I was focusing inwards too much.

As 2017 dawned, fifteen months after Melitta's death, I resolved at midnight to find a unique way to honour her memory. I wanted to respect Melitta's simple credo that we should leave the world a better place.



CHAPTER 3

THE DECISION

“The most difficult thing is the decision to act, the rest is merely tenacity. The fears are paper tigers. You can do anything you decide to do.” — Amelia Earhart.

Washington D.C, spring 2017

Six-thirty in the morning had always been my favourite time for strolling the neighbourhood with the dogs. Washington’s short spring had burst into life. Azaleas revelled in garish reds, pinks, and whites. Daffodil stems lay collapsed in post-flowering exhaustion, violet irises rose regally, and weeds plotted their takeover. And that’s where the idea popped into my mind: why not spend a year walking around Great Britain, Melitta’s birthplace, to raise awareness about preventing cervical cancer by promoting screening?

I knew Melitta would have liked the idea. Shortly after we met, when we were courting – that word sounds old-fashioned but right – we hitchhiked and bussed around Malawi for two weeks, discovering the country and each other. Steaming up Lake Malawi on the ancient *Ilala*, crammed with passengers, all

selling or eating salted fish, the sunset gracing us. Holding onto the seat of a rickety bus careening down the rain-gullied slopes near the northern lakeside mission town of Nkhotakota. Stumbling upon a pottery in the bush, selling the most delicate bowls. Laughing with glee as we splashed in a stream in the Nyika plateau highlands. Relishing the aroma of conifers, while reading, deep in Malawi's central forests. I began to glean the essence of this woman. Melitta's wicked sense of humour teased me out of being too serious. Her fierce competitiveness – middle-child syndrome, she said – and hunger for reading meant she thrashed me at Scrabble. We played most days during the trip and the only question was how much she would beat me by. Her sociability shone through; we stayed with volunteers in every village, people she had met during the two years she had been in Malawi. A romantic bent – a scribbled note with a short poem – was complemented by practicality – where were the bus tickets? We both felt strongly about how Malawians were suffering under the dictatorship of President Banda. Above all, we walked. So, strolling around England and Wales, where Melitta had grown up . . . she would have approved.

I stomped with excitement on the soft asphalt. This felt like another life-changing moment. The dogs nudged me back to reality as they glanced up, unimpressed. I hurried the hounds home and, scanning Google, I learned of an official English coast path, under construction, around 2,800 miles long, and a completed Wales coast path of 870 miles. If I could average ten miles daily, then I could complete the circuit in a year.

Two days later, the fledgling idea had ratcheted into a firm commitment from which there was no humiliation-free escape. I asked my boss about taking a year of unpaid leave. Her eyes misted over. Of course, she said, and she hoped her husband would do something similar for her in the circumstances.

“Talk to HR. You'll need to find a sponsoring organisation

because we'll have to sign an agreement, so we know that you're doing something.”

Any vanities I might have had about being irreplaceable vanished in an instant. I mentioned the idea to my children. Emily and Nic were working in the US, while Georgie was attending university in the UK, in Manchester. The word “crazy” came up, but they were enthusiastic and promised to join for a leg or two. Decision made! It felt suspiciously easy. Still, I reassured myself by recalling that the turning points in my life had all been unplanned. I set myself a year to prepare, aiming to start in June 2018.

I learned how over four thousand people have climbed Mount Everest, and nearly two thousand have braved the cold to swim the English Channel. Hundreds of thousands walk the Camino Way each year, and a thousand hardy types complete the entire 2,200-mile Appalachian Trail in the US each summer. Yet only 100-150 people have ever walked around mainland Britain. I wondered why. There seemed to be a gap in the market for bucket-list ambitions that don't require abnormal fitness levels.

During Thanksgiving 2017, Emily, Nic, Georgie, and I batted around names for the campaign, finally landing on ‘*3500 to End It*’ – as in 3,500 miles to end cervical cancer – and set up a website, www.3500toendit.com. Now, I needed a charity partner. I knew of Jo's Cervical Cancer Trust in the UK, dedicated to eliminating cervical cancer. However, I wanted to raise funds for research into changing behaviour around screening and knew that Jo's focused solely on advice and advocacy. I called a friend.

My friend introduced me to another Jo – Jo Marriott, who ran Cancer Research UK's – CRUK for short – volunteer operations in East Anglia. Jo said that a partnership could work and we started fortnightly calls. Jo listened patiently to my ramblings and kept me focused on logistics. Where would I stay?

What about medical supplies? How would I publicise the effort? I noted each question, knowing that I had not thought through the answers, and assured her that it would all work out.

Shortly afterwards, a work colleague's query forced me to think harder about my purpose.

"How much are you hoping to raise?" she asked. She shook her head in bewilderment at my answer, then said, "Why don't you set aside a third of your salary for three years? Why spend a year walking?"

Her blunt challenge forced me to examine my motives. I knew I would need a reason to slog through a drizzly wind for hours every day in the winter. Honouring Melitta's memory was important. But Melitta was practical, with no tolerance for flim-flam. To pay tribute to her, I would need to make a difference.

I researched cervical cancer and was surprised by what I learned. Unlike most cancers, cervical cancer is caused by a virus, the human papillomavirus (HPV). In 2006 a vaccine was approved against the dangerous HPV types leading to cervical cancer. It had to be administered before the onset of sexual activity. The results astounded public health experts; HPV rates fell by 85-90% among vaccinated young women. Adult women who had not had the benefit of the vaccine needed screening. If vaccination and screening reached certain thresholds, cervical cancer could be eliminated.

I say 'eliminate' rather than 'eradicate' because, in medical parlance, 'elimination' means reducing to a low level, whereas 'eradication' means zero cases, as with smallpox. After researching, I became excited. I realised that vaccination plus screening could eliminate cervical cancer within twenty to thirty years. In a generation!

I punched the air with elation. Vague ambition had coalesced into a more specific purpose: *raising awareness that we can eliminate cervical cancer within a generation.*

It resonated. My daughter Emily narrated a two-minute video I posted on my new website. Ultimately it was viewed over 600,000 times.¹ I gave myself three goals. First, policy: I hoped that CRUK would lobby the government to commit to eliminating cervical cancer by a set date. I knew that Jo's Cervical Cancer Trust was advocating this approach, and that Australia was considering it. Second, I would air the message via local radio, TV, newspapers, and online. Third, I would canvass funds so CRUK could support researchers studying screening.

I flew to England and met Jo in a roadside café near Cambridge on a slate-grey November day in 2017. Jo, a smiling, friendly woman in her thirties with two teenage daughters, was bubbly, cheerful, and organised. Her younger daughter was about to be vaccinated against HPV at school, Jo mentioned. Jo overlaid her practicality with a cheery manner, which softened her scepticism about whether I was serious.

I asked Jo to allocate the funds I would raise for studying cervical cancer screening. No problem, she answered, saying how CRUK is the world's largest cancer research organisation, with thousands of volunteers and high street outlets across the country, supporting hundreds of scientists. Within days Jo had identified a CRUK-supported researcher at University College, London, coincidentally also named Jo – Professor Jo Waller. Was everyone in the cervical cancer world called Jo?

I went on to learn how Professor Waller was examining why nearly thirty per cent of women missed their screening appointments. Did they find the procedure awkward? Or were they too busy? Screening works: since being introduced in the 1980s, UK cervical cancer rates have more than halved. The

¹ Find the video at www.3500toendit.com or search for “we can eradicate cervical cancer” in YouTube.

researchers were reaching beyond diagnosis to pilot text reminders with pop-up calendars for appointments. I loved this idea. Melitta's periodic cervical check-up had been delayed by a few months because of the normal unforeseen happenings of life: first the doctor had been sick, and then we had been on holiday. That delay of a few months had proven fatal.