

## Caregiver by Gary D. Moore – novel@gmasw.com

That November morning began like many others. Up early and programming diligently. My mother met me in the kitchen as I brewed a rare second cup of coffee. She acted oddly, and was unstable. Our conversation was brief. She returned to bed with my assistance. Mom's claim that she was tired did not fool me. That episode began a remarkable, however, brief period of my life.

Doctor prescribed tests did not substantiate that mom had a stroke, but something happened to disorient her. She did not remember how to write a check, make a cheesecake (of which she was a master), and many sundry tasks that she had so easily done for 80 years. Mom was dependent on others, specifically me, to do practically everything. Meal preparation, washing, cleaning, vacuuming, and all the other household chores she did out of love...were, now, beyond her once capable hands. One thing that enunciated mom's quandary was the inability to drive a car. This was a fretful loss of her independence.

My sister migrated to Florida for the cold months, my oldest brother lived in Arizona, and another brother worked six days a week. The responsibility of taking care of mom fell on me, or place her in an assisted care facility. The latter was not an option for a number of compelling reasons.

Visits to doctors were an endless routine on a weekly basis. Finally, I had enough of the visits, and demanded to know why? One clinic was very upset because I questioned what the doctor prescribed. Mom's regular physician and I talked. He would take care of that situation, and did so promptly. Mom did not miss the visits, and I believe, was better off... and a little more solvent without the extravagant office fees and expensive useless medications.

The number of pills mom consumed daily was another cause for alarm. My mom was a pharmacy technician for almost two decades. She knew her pills, and what they did. Some prescriptions were unnecessary (in her opinion). That caused a constant discussion about taking medication. A chart was constructed. We (jointly) began allocating the meds because she either did not take some, or took too many of others. It was a quandary. However, the medicine chart worked. My routine listed each round of pills at the correct time. As self-appointed truant officer, I forced mom (at times) to begrudgingly take pills. Medicine administration became my most disliked task as caregiver.

That year was a secret and private time for mom. A very limited number of people knew that mom was incapacitated and (slightly) slipping mentally. My friends that visited noted a change in her. She was self-conscious of her quirks, and often disappeared into her bedroom when people visited. One person, who had the habit of dropping by unannounced, did so on a bad day. That person was so insensitive and obtuse that he did not get the hint that he should leave. I had to be very rude. The incident is not justified, but people should take a suggestion (not hint) to leave, and then do so graciously. I have not heard from that person since.

Until my care giving time, I had been very active in several organizations. Many noticed my absence, but most did not know why. A friend from one of the organizations talked about her time as caregiver. Ann had a very similar experience. We had several emotional and compassionate conversations along with a volley of e-mails. The advice she gave me came from her heart rendering experience. Ann simply said that she deeply regretted losing her temper in petty arguments, or not giving in to some whim while caring for her mother. Her advice made sense.

My attitude changed...thanks to Ann's encouragement. Personal pursuits halted. Life became centered around mom. She was my dedicated priority. While other family members were busy with hectic lives, a gracious Aunt and a very close friend of my mom volunteered to help. Those two charitable women stayed with mom while I shopped, or did other essential errands. Leaving mom alone was never an option.

To elaborate or describe a daily routine is not possible. It was extremely boring, but crucial. Care giving has entertaining moments combined with unique and sometimes tearful episodes. Any instance is not easily described. The situations are exclusive to the persons sharing spontaneous moments. And, not a single second can be recovered, and certainly cannot be recreated or even understood. Those times, like all others, are history. The events will not change any aspect of the world, except, perhaps, the caregiver involved.

My friend, Ann, encouraged me through her personal pain and regret. However, in defense of her actions, it is highly unlikely that anyone can do everything right (as a caregiver). My regrets and pain are still real...as is Ann's. Neither of us are ogres, nor bad people for the few instances when we didn't say everything correct to our mothers, or perhaps, a relative. If Ann or I could turn back the clock, we would do some things differently. We would comfort our mothers in a different way. We would tell them we loved them more often, hold their hand more often, and do almost anything we could...just for one more minute of their presence. However, we do not have that option. We live with some remorse, regret, and the knowledge that we, like many others, did what we could for a loved one...not perfectly, but humanly...we were there for them.

There are countless poignant lessons caregivers learn. However, regrets have to be mulled over... not justified, but addressed, and then put in perspective. Regardless of remorse or pain, I would not trade that year with all the tumultuous and traumatic experiences for anything. That year was filled with spectacular moments of doing something unselfishly...for someone I loved...accompanied by hours, days, weeks, and months of tasks that will never be repeated again. No one recognizes what I did, or went through. That is not important. Until this writing, my care giving time has not been discussed. That year was (personally) my best and worst. However, I would not trade any of it for anything in the world.

If you are in, or face a similar circumstance, be patient every minute, every hour, every day. Your actions, words, and deeds have reciprocal affect. Hostility toward any individual is often regretted, but especially from someone that will not recover. Time with them is precious. Practice love and patience...for the person you are tending. Above all, do everything you can for them, and the others you love...now!

### **Author's Note:**

Care giving is, often, not planned. Rather, it is done out of necessity. Care giving is done from a desire to help someone because they cannot help themselves. Care giving is beyond a simple succinct explanation, or narrowed to a single term (e.g., love). The caregiver is not concerned if someone (or anyone) recognizes what they do, they simply do what is necessary to give the best care to the individual.

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