

Loving Your Parents When They Can No Longer Love You

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Library of Congress Cataloging-in-Publication Data

Hargrave, Terry D.

Loving your parents when they can no longer love you / Terry D.

Hargrave.

p. cm.

ISBN-10: 0-310-25563-5 (softcover)

ISBN-13: 978-0-310-25563-5 (softcover)

1. Aging parents—Care. 2. Aging parents—Care—Religious aspects—Christianity. 3. Frail elderly—Home care. 4. Adult children of aging parents—

Family relationships. 5. Caregivers—Psychology. I. Title.

HQ1063.6.H37 2004

306.874—dc22

2004023478

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Interior design by Beth Shagene

Printed in the United States of America

05 06 07 08 09 10 11 12 / ❖DCI/ 10 9 8 7 6 5 4 3 2 1

Introduction

This is a book about struggle. It is the struggle to be weak when we desire to be strong, to be helpless when we want power, and to be sacrificial when we'd really rather be selfish. This is a book about struggle.

It is not a struggle that exists so much between the generations of caregiver and older person but rather one between all people and life. Aging, in this generation and at this time in history, just happens to be the vehicle through which the struggle seems most evident and present.

On the one hand, we desire to control our destinies, implement our wills, and enjoy the freedom to choose when, how, and who we love and who will love us. Western society bombards us with these desires. We want to decide our career paths and educational backgrounds, achieve financial security and neighborhood safety, and have convenient and close relationships. Most of the time we can ignore situations where our needed talents receive little compensation. We can remain ignorant of the needs of the world and so use our financial resources for our own desires. And we can cocoon ourselves tightly in predictable and emotionally neutral relationships. But then there's the other hand. God wants us to understand the value of vulnerability, weakness, and sacrifice—and it is in these vulnerable states that God's power becomes active in our lives. As Paul says in 2 Corinthians 12:10, it is in our weakness that God makes us strong. Most of us know this fact and feel more than willing to cooperate—at least, until weakness really touches our lives. The struggle for us comes down to becoming the weak ambassadors of a mighty God, in the face of our desire to exercise control, power, and choice. Enter aging. Precisely at this time in history when we seem to have so much ability to control information and so many reasons to get self-focused, our parents and family are living longer than at any period in modern history. Medicine has devised ways to keep people alive, but a good percentage of them will have chronic health problems that demand care from others. Who will provide this care? If you are reading this book, chances are you are currently a caregiver or see caregiving in your near future. In caregiving we lose a good part of the control of our lives, we become powerless to determine outcomes, and we must put our needs behind theirs. Aging and caregiving in the twenty-first century force us to struggle with the reality of life. This book is about how we work within this struggle but also how we are changed by the struggle. Aging, of course, is not optional. It is like a giant vacuum

cleaner that will eventually suck us all up. You can pour on the lotions to smooth out the wrinkles and mix in the dye to color the hair, but you will not be able to cover up the problems and challenges that aging presents to the family.

Perhaps the biggest problem of all occurs when we confront the complex reality of giving care to an older parent.

When you consider your busy schedule, how deeply you long to control your own life, and how frail and needy your parents have become, the job of caregiving can stress the living daylight out of you.

Loving Your Parents When They Can No Longer Love You comes out of personal experience. I have cared for older people in a personal care facility, and my wife and I have cared for my mother-in-law, who has Alzheimer's disease. This book will bring you face-to-face with some of the hard-hitting realities that must be faced, such as taking care of your parent's legal and financial issues, choosing where to live, the type of care your parent will need, and how to deal with physical and emotional health problems. Much of what I suggest comes from my years of studying aging families as a professor and therapist, but most everything in this book has been worked out in the school of hard knocks in my own experiences of caregiving.

This is not just another book about how to care for aging parents, however, or even how to care for yourself while you provide the care. It is at its core a book on how you can lovingly and tenderly embrace the job of caregiving as a spiritual journey that can deepen your faith while strengthening your character.

Caregiving is both a story and a journey. I intend for this book to help you grasp the importance and opportunity of the job you have taken (or are about to take) and to assist you in creating your own special story and journey—and what a journey it can be! A journey to the depths of learning how selfish and withholding we can be, to the difficulty of managing the day-to-day work of care, to the desperation of learning how to hold on to God when no more hope or energy remains. I hope yours will be a journey and story like mine, one that has changed me in ways from which I wish never to recover.

PART 1

Embracing Caregiving and Aging as a Spiritual Journey

Consider it pure joy, my brothers, whenever you face trials of many kinds, because you know that the testing of your faith develops perseverance. Perseverance must finish its work so that you may be mature and complete, not lacking anything.

James 1:2–4

Congratulations! You have been elected. Maybe you slid into the job a little at a time; perhaps it happened with a single phone call. But if you are reading this book, chances are you are, or very soon will become, the caregiver for your older parent. It is a big job, and at one time or another, it will take you to the very edge of your physical and emotional strength.

What's in it for you? All sorts of good things, like brokenness and humility. Consider caregiving a spiritual obstacle course—it'll do you good, but it'll also present you with a series of potent challenges. While we tend to equate comfort with joy, the biblical writer James talks about a different kind of joy: the knowledge that we are being made into spiritual people, people who at the end of life will lack nothing. God means for life to mold us into a spiritual condition fit for the kingdom of heaven. It is not our prerogative, nor is it in our control, to fit the spiritual life around the pleasures of this earthly life. For those of us who live with the obligations of caregiving, nothing is more difficult than to grasp this concept. Yet nothing is more precious.

Chapter 1 In Two Years She Will Be Dependent

*That is why, for Christ's sake, I delight in weaknesses,
in insults, in hardships, in persecutions, in difficulties.
For when I am weak, then I am strong.*
2 Corinthians 12:10

While some people hold the aging in high regard, most in our society treat them with contempt. Consider the knowing jokes and so-called wisdom about aging in our culture:

- Growing old isn't so bad; it certainly beats the alternative.
- I'm not eighty-one years old, I'm eighty-one years *young*.
- Growing old is not for sissies!

Attitudes and beliefs about aging vary about as much as there are people in the world. Most of us, however, have at least some attitude of defiance toward aging. We work against the natural flow of physical deterioration with Botox injections, antiaging potions and pills, and fashions that disguise and cosmetic surgeries that mislead.

And yet, aging comes nonetheless.

THE FRIGHT OF AGING

My first experience with aging scared me. As a young boy, I sat in a small tar-paper house that, as a man, I could cross in four strides. Its turn-of-the-century gaslights made a constant coughing sound, as though your head were caught in a waterfall. A potbelly stove supposedly warmed the meager abode, but poor ventilation made the task almost impossible. I did not breathe the thick, musty air as much as I had to swallow it. The house belonged to my father's father, a man I would come to respect and love. This orchard farmer from southwest Colorado had experienced a hard life with his wife and twelve children. He had only one arm, having lost the other in a railroad accident during the Great Depression.

As I sat on the stoop of one room, he tried to coax me out of my shyness into conversing and playing with him. "Come here and let me hold you," he would say. He didn't know it was not shyness but terror that kept me in the shadows. His aging face, scraggly beard, and one arm unnerved me. It seemed to my young eyes he had come straight out of the horror

shows that delighted my brothers and me. He looked so *unnatural*. My small mind could not imagine anyone could ever end up in such shape. He looked and spoke spooky.

So I made up my mind as a five-year-old to avoid older people. At times I couldn't avoid them—around Thanksgiving or Christmas, for example—but as a whole, I could look the other way and never feel concerned about their lives. Most of all, I could remain safe from all that fear.

But at one point in my life I finally decided to look the issue in the eye. I was in graduate school when I learned that my mother's father lay dying of stomach cancer. He had written me off when I was a kid. He didn't believe I had worked as hard on his ranch as my older brothers had. He never called me by my proper name and failed to attend my wedding. We had an issue between us, to put it mildly. But because he was my grandfather and I felt obligated to see him before he died, I traveled with my wife and mother to see him one last time. The weekend passed with little to note, but when the time came to say a final good-bye, I felt lost and disoriented. I had no words with which to bid him farewell. I had nothing honest to say to him. So I let him pass me by, like a stranger with whom I had brushed sleeves on the street. I did not feel that I "blew my opportunity," like dropping a last-second pass that could have won the football game; it was more like I'd never even stepped on the field. To this day, I can remember my total lack of effort. It shames me still.

"I will never let a moment like that pass by again without at least trying to make connection," I later said to my wife. As a budding family therapist, I knew that families everywhere struggled with these issues. I felt a missionary zeal to help these families avoid the despair and shame I felt. As a result, I took a position as a personal care facility director with a visionary friend of mine who was committed to create progressive older communities. I had energy and zeal but didn't know much about the process of aging. I did lots of reading, but my most valuable teacher became the older people themselves.

The very first older person I met from the facility was a retired accountant named Dixon. Mucus drained from his hook nose, rolling down in beads on the oxygen tubes attached to his nostrils. His emphysema and respiratory problems surely resulted from long years of smoking. Burn marks dotted his furniture, and he reeked of greasy hair and stale body odor. And he was *mean*. No one visited him, and we all assumed he had verbally abused his family into a permanent cutoff. He yelled at my staff, and he yelled at me, as if to proclaim that

his life was justified and the rest of us were idiots. He would rant, “I haven’t lived this long to have to put up with you kind of people!” He was, in many ways, the living rule book on how to age without grace.

This time I did not feel fear, although all his maladies did cause me some discomfort. This time I felt embarrassment—embarrassment to see a human being who had progressed to such a sad shape he could no longer take care of basic body functions or govern his angry emotions. He didn’t seem to mind the stuff dripping from his nose or care what anyone else thought of him. Dixon was a man out of control, an extremely weak man who still thought of himself as powerful. How pathetic to see someone in that condition and in that kind of quandary! I wanted him to cover himself with guile or pretense in order to make the whole aging thing look better than it actually did. At the same time, I felt welling up within me my old tendency to run away. I wanted to withdraw—but this time I stayed.

Ever since, despite the fear and embarrassment, I have been willing to look straight-eyed and full-faced into aging.

WHAT IS AGING?

What is this thing called aging? First and foremost, it is a process of maturity as natural as taking one’s first step. Yet a special twist to aging makes it particularly difficult. These steps we take are heading us toward our own demise.

Let me be clear. I do not believe that aging is one long, depressing death march in which we inevitably do less and less and wander more and more. We can be productive and vital well into our sixties, seventies, eighties, and some of us, into our nineties. No chronology magically states when we are old enough to be identified as the “aging population.” Some people are old before they get out of their fifties; others are still going strong long after most people their age have died. We can remain vital for a long time.

In many ways, this is what we all desire—to be vital and alive for a good long time and then die in our sleep. We love to hear the stories of the ninety-one-year-old woman who plays jazz piano in a club, or the eighty-six-year-old man who completes a marathon. But these stories aren’t really about aging and don’t well represent the aging process. For the purposes of this book, when I speak about aging, I mean that time of life when disease or wear has taken a toll big enough to significantly diminish or remove entirely one’s ability to function in an independent manner. This is particularly important to the family, because, by my definition, an old

person needs care.

This “being old” flies in the face of what most in the Western world say they want out of life. Old means, at the minimum, that we no longer get to hold on to our lives. It means the aging process has advanced to such a point that we can no longer pretend our physical lives will go on forever. It means we are nearing death. We cannot hold on to our health, our wealth, our precious belongings, or even our essential relationships. At first blush, being old is not the opposite of young but the opposite of *life*. Can anyone in the modern age actually look at this process and not be afraid and embarrassed and want to turn and run away?

I believe we can. In fact, I believe it’s a must for anyone who calls himself or herself a Christian. And if we willingly look at the process of aging and being old, we will find the essential elements of discipleship and the kingdom of God. Who needs the process of aging? We do.

THE COURAGE OF FAITH, THE HUMILITY OF LOVE

We need aging because it is quickly becoming a defining and sanctifying process in the lives of Christians. Whether we are the older person or the caregiver of an older person, the aging process forces us to recognize that we do not control our own lives, that we have little say in how the future will progress, and that any fruitful effort is born out of humility.

Of course, these ideas probably sound familiar, because the Bible is chock-full of just such commands on what it takes to become a man or a woman of God. Remember the words of our faith—words we say we believe?

Do nothing out of selfish ambition or vain conceit, but in humility consider others better than yourselves. Each of you should look not only to your own interests, but also to the interests of others.

Your attitude should be the same as that of Christ Jesus.
Philippians 2:3–5

Such a simple phrase—our attitudes should be the same as that of Jesus. We commit to God, by faith, to remain his through the thick and thin of life. We bind ourselves to God in the same way the smith uses heat and strength to forge metal to metal.

But God is also committed to us. He’s committed to making us into the image and attitude of Christ Jesus. And what is that attitude?

*Who, being in very nature God,
did not consider equality with God something
to be grasped,*

*but made himself nothing,
taking the very nature of a servant,
being made in human likeness.
And being found in appearance as a man,
he humbled himself
and became obedient to death—
even death on a cross!*

Philippians 2:6–8

Very simply, God is committed to us becoming humble servants. This is the way of the cross, the way of Jesus, and the way all of us are to follow.

When a person in our family becomes old and requires care, what we have only thought about suddenly becomes an emotional reality. The sacrifice we make as a caregiver for an elderly person requires strong character and the attitude of Christ, and it's a very different thing from giving care to a child. The child grows, becomes stronger, and interacts more and more. Our sacrifice for our children no doubt teaches us much, but it focuses on a young man or woman who is built for the future. It is a hopeful humility. When we give care to an older person, however, we sacrifice for one who grows weaker, interacts less, and eventually will die. It is a service and sacrifice for which we see very little—maybe even nothing. Caregiving for an older person is purely about servanthood. Surely, this kind of sacrificial giving is exactly what Jesus Christ exercised in his great love for us. At this time in history, God has created an opportunity for us to learn what it really means to love one another. Caregiving means accepting the humble place of servanthood. And the opportunity exists right in our own families!

God molds us into Christ likeness through our own aging processes. The older person in need of care must recognize that life is coming to an end. There is no room for self-sufficiency and defiance. Being old—really old—means finding the precarious balance between doing what we can and relying on others to fill in the gaps. This process of letting go and entrusting ourselves to others demands a kind of courage made possible only by faith.

Many older people in our society chant the mantra, “I don't want to become a burden to my children.” While this expression is well-meant, it is, sadly, misguided.

When we speak such a phrase, most often we are really saying we never want to turn over control of ourselves to someone else. We certainly don't want them to have to serve us! It is a step of tremendous faith to embrace the idea that God uses our growing old and our caregiving to mold us into

humble and courageous servants.

This kind of faith is born of struggle because growing old, as well as accepting and providing care, is anything but easy. Not everyone will have to experience the full process, but for those who do and thus are being trained by the great aging task, it will bring forth the courage of faith and the humility of love.

Caregiver and older person are not called to avoid burdens for one another; we are called to lay them aside for the greater burden of Christ.

Come to me, all you who are weary and burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am gentle and humble in heart, and you will find rest for your souls. *For my yoke is easy and my burden is light.*
Matthew 11:28–30

If we are able to embrace growing old and caregiving as the yoke of Christ, we will not try to minimize the impact the process has on our lives. Instead, we will recognize that this precious yoke that requires us to be humble and courageous is meant to yield a unique gift—the gift of rest and peace. It is not an easy gift, but for those who are willing to take it on, it will bring peace.

HEROIC TO HUMBLE

Caregivers and older people are not locked in a battle against each other. We are in a dance, a dance that requires a balance of intimacy of communication, humility of yielding to one another, and courage to trust the process. We do not have to do the dance perfectly; we just have to keep moving. If we keep dancing, God will use our faithfulness to produce the valuable fruits of peace, joy, and love.

In my own life, I did not immediately recognize how this process built the amazing character and attitude of Christ within me. But as I kept moving to the rhythm of aging, I found out more about myself than at any other time in my life. And the way of Christ became alive to me.

When I first began working at the personal care facility with some eighty residents, I truly believed in what I was doing. I wanted to learn from, minister to, and care for elderly people and their families. I also felt compelled to work on issues within my own family to resolve old wounds so we could communicate and love better.

I felt I was “doing good” among people who needed me. I felt like the Lone Ranger, who rode in heroically to help people out of seemingly impossible messes. As I worked my way through graduate school, I studied elderly people and

their families in clinical settings. I tried new techniques to help older people to function better and families to express love and care in constructive ways. By the time I neared the end of my graduate work, I felt I knew all about aging. I knew the important things about the process. I knew what to look for, how to be effective, and how to help the elderly person and his or her family finish well. I had worked with many older persons in a caregiving role, but none more closely than my mother-in-law, Genevieve. And only then did I realize how little I knew.

A WORTHY AND COURAGEOUS WOMAN WITH A PROBLEM

Genevieve was a remarkable woman in so many ways. Although the top of her head reached only to the middle of my chest, her courage and steadfastness always left a deep impression on me. Even as a fourteen-year-old, when I met her daughter in junior high school, I knew our whole community sympathized with her and held her in high regard. This woman knew how to persevere through searing pain and still make life positive.

As a young adult, this youngest of three children from an Oklahoma family married Bill, a Harvard Business School graduate who had become a southern California advertising executive. Bill and Genevieve had four beautiful children together, three boys and a girl who would one day become my wife. Bill, a fun and gregarious man, always seemed a little bigger than life. He and Genevieve knew some of the famous and beautiful people of Hollywood, and they were beautiful people themselves. He had his boys out on the tennis courts at the club before they reached the age of five and always seemed eager for the next adventure. He was older and more confident than Genevieve, and he was very successful. But he also struggled with clinical depression. When business setbacks in 1960 hounded him during one of those bouts, he made the unfortunate decision to take his own life.

Everything Genevieve knew—home, housekeeping, mothering—got ripped to shreds in the hurricane of her husband's suicide. Imagine how this woman, at the age of thirty-five, must have felt as she faced life with four young children to raise. She made the courageous decision to move her young family from southern California to Amarillo, Texas, to live in a small town closer to her brother. After living in Amarillo for a year, her life began to stabilize. She joined a Presbyterian church and moved into a stable neighborhood, and her brother consistently provided a positive male presence in her family.

One day, however, her oldest son, Bruce, came home ill.

Over the next couple of weeks he got steadily sicker, and one Friday evening Genevieve hastily summoned her brother and an ambulance. Before the night ended, Bruce had died from acute leukemia.

Somehow Genevieve gathered herself, and with grit and determination she continued to raise her children in a healthy and positive environment. She pieced together her life around making them a success. Her two remaining sons, David and John, got good grades in school and became skilled tennis players. Sharon, my future wife, loved horses and excelled at equestrian activities with her own horses, Macaroni and Geronimo. Genevieve made life “normal” for these kids in the face of tragedy that would have crippled most of us. When most of us would have crawled into a foxhole, this gifted, strong, and sacrificial woman led the charge and set up supply lines to her children. She was remarkable.

But she was far from perfect. Agonizing thoughts and memories haunted her, and she began to drink to numb her raw emotions and soothe her pain. As David and John grew, occasionally they’d see Genevieve’s drinking get out of control and impair her judgment. David, the oldest, would reassure Sharon, “It’s just a small thing she has to do to keep going.” It’s not hard to understand his perspective. Who can say that we, too, might not turn to drinking if we were to lose both a spouse and a child? The drinking didn’t appear to interfere much with the rhythms of an otherwise happy family. In 1970, however, the walls came crashing in once again. David, a natural leader and a great friend to many people, shared his father’s appetite for laughter and adventure. David was attending Oklahoma University at the time, and one evening a pathological killer ambushed him and his date. The man locked them in a car trunk and murdered them in a grisly fashion more suited to a battlefield than to a college campus. Genevieve’s family of six had now been reduced to three. Some wounded families lose half of their members, but seldom do they lose them one at a time in such painful and shocking ways. My future wife and brother-in-law felt overwhelmed. But somehow, Genevieve managed to gather herself once more and reassure her children, “It will be OK. We will be OK.” Despite the pain, she resolved to move her family forward.

Both John and Sharon graduated from high school and college, got married, and by the mid-1980s began to start families of their own. With the addition of spouses and grandchildren, it really began to feel as if it *was* OK. Maybe, just maybe, all of us really *were* OK.

AGING: WHO NEEDS IT?

In 1989, the University of Mississippi offered me a position to teach marriage and family classes to undergraduate students. It was a dream come true. I loved education and had always fantasized about teaching at the university level. My wife and I settled in with our one-year-old daughter. My wife's brother, John, and his wife had started their family in Michigan. Our jobs felt secure. We took vacations together. Genevieve would travel to Mississippi and to Michigan for long visits. It was a solid time of having so much fun together, watching our families grow and become close.

Just two years later, the wheels began to come off. Almost a quarter of a century after the fact, a district attorney decided to prosecute someone for the murder of Genevieve's son and his friend. Although there always had been suspicions that a certain police officer had committed the awful crime, no charges were ever filed. We had learned to live with the reality that we'd never know the circumstances surrounding David's death. The new investigation felt like shears cutting through the fabric of peaceful family life.

Fears unfelt in years suddenly began to torment my wife, Sharon. "Keep the curtains closed," she instructed. "I just don't know if that crazy person who killed David is out there somewhere." Thoughts of long-denied justice came into John's mind as it began to look more likely that the district attorney would pursue prosecution. And then there was Genevieve. Genevieve simply seemed lost. Snagged once again in a tragedy out of the past, this time with no family around to tend to her pain, her drinking increased.

When charges were finally filed against a suspect, the district attorney's office went on something of a witch hunt to scare up evidence. Since most of the evidence from the case had somehow mysteriously disappeared, the DA tried to find circumstantial evidence. The sordid story ran in newspapers and on popular tabloid television shows. All of this was agonizing and traumatized everyone in the family.

Sharon, John, and Genevieve got thrown back in time, landing in a foxhole in the midst of a raging battle. I was in the battle also but in a different foxhole. I could only watch as my family relived its days of pain. I could do nothing but try to be available. Most of all, I felt I needed to be more available to Genevieve. Just before the trial, I took a job at a community college and moved back to Amarillo, Texas, so we could live in the same area as Genevieve.

I knew it was the right thing to do. I really didn't know how it would work out, but I had a strong conviction that if Sharon,

my children, and I were in the same town as Genevieve, somehow we could provide a shield to deflect some of her misery. I could help put an end to the tearing of the fabric of our family. But my choice meant leaving a place I loved, taking a job that felt like a step down to me, and moving to a place to which I had no desire to return.

We made the move, but it did not stop the pain. The trial featured two weeks of gory details about the murder and things we would have preferred not to know. Two weeks of the prosecution wandering through weak circumstantial evidence, aware that the real evidence had never been found. Two weeks that ended in a “not guilty” verdict.

We tried to hold each other close, but Genevieve never quite recovered. Her sorrow spiraled into out-of-control drinking. She couldn't stand to see her grandchildren take even the smallest risk, from swinging at the park to walking in the mud. Her anxiety, sadness, and alcoholism isolated her more and more until her social world had shrunk down essentially to us. And I was stuck in Amarillo. I had reasoned that my heroic sacrifice to take care of my mother-in-law would last a year or two, and then I'd move back to a university position. I longed for the research and vitality of university life. The landscape in Amarillo felt barren and depressing to me.

Primarily, however, my effort to heal my family and take care of Genevieve had ended in utter failure. She continued to go downhill. I felt desperate for escape. I would apply for jobs and get close to getting an offer but always seemed to end up the second or third choice. The move from university to community college created questions about whether I could write, do research, or reach tenure. After four years, I remained mired in a job I hated, in a place I loathed, taking care of a woman who could not be cared for.

As I saw it, all my heroic efforts had ended in a hopeless failure. As Genevieve started slipping into dementia and losing control, I slipped into a clinical depression. I had always tied my self-worth to my success in my job, family, and relationships. Yet now my career seemed frozen, my family had fractured, and in my anger and bitterness, I found myself withdrawing from relationships. I remember saying to several of my friends, “I feel like I used to be a rookie pitcher who won games in the World Series, and now I'm playing for a local farm club.”

But God was at work in my life. He wasn't trying to make me a heroic man of God or a mighty warrior for Christ; he was trying to make me a humble servant with the attitude of Jesus. Slowly I began to realize the folly of tying my personal worth

to my job. I started to conclude that I would serve wherever I was and that I would be thankful for the life and relationships I had. The depression eventually lifted—but still I felt immobilized and frustrated because of Genevieve’s continued decline. Her life became so narrow that my children and I got squeezed out. She no longer dropped by our house and seldom invited us to hers. I could see her memory slipping and her unexplained anxiety increasing, along with an inability to manage her drinking and personal affairs.

It was time to step in. John and his wife and Sharon and I sat around our dining room table seven years ago to set out a plan to confront Genevieve’s alcoholism and to plan for her eventual care. I knew all about the process of aging. I let everyone know I suspected that Genevieve had Alzheimer’s disease and boldly predicted, “In two years, she will be dependent.” Sadly, I was correct.

We sought help and made several efforts to intervene yet again to address the alcoholism, to little effect. As Genevieve continued to withdraw, her life continued to unravel. Within two years she became ill and had a minor stroke, which prompted us to take a direct role in her caregiving. We moved her first to a retirement facility that provided meals, then to a personal care home that provided more supervision. More recently we transferred her to an Alzheimer’s facility. Over the course of five years, we had to slowly take over responsibility for her medication regime, her financial decisions, her bathing and hygiene, and her plan for health care. All this we did in a willing manner because we saw it as our responsibility. Although I felt that God was working in my life and breaking my self-focus, I still tried to take care of Genevieve out of my own “heroic” strength. I thought of myself as a good son-in-law. I thought I was living out what I had taught so many people about aging. I was mistaken.

My world crashed during the summer of 2000. Genevieve was living at a retirement facility that provided meals when I received a call from the cook. “There’s something really wrong with Genevieve,” she said. “She’s unable to stand by herself and doesn’t make sense.” She appeared to be paralyzed on the right side of her body, her speech was slurred and incoherent, and she was on the edge of consciousness. Because I knew the process of aging, I would have bet the farm she had suffered another stroke. I made arrangements to get her to the hospital, called Sharon, and got in touch with Genevieve’s neurologist—who also guessed it was a stroke.

While technicians drew blood at the hospital, performed

tests, and prepared for an MRI, Sharon and I discussed options for future care and what the stroke would mean for our lives. As we held Genevieve's hand and reassured one another, the neurologist came into the room with a sheepish grin on her face. She showed us the test results and said, "Her blood alcohol level is high. She's drunk."

I don't recall the exact order of things after these words floated around the room and finally lodged into my consciousness, but I do remember feeling overcome by anger. I do remember the furious words spewing out of my mouth. "You are so selfish!" I raged. "You think the only thing we have to do is take care of you! Don't you realize how you're ruining my life?"

After Genevieve began sobering up, I took her to the car to return her to her apartment, my vicious words echoing in my head. Genevieve apologized, but I knew all of my heroic efforts through the years had been wasted. Within a few hours, I reached a surprising conclusion: the failure didn't rest with Genevieve alone but also with me. Here was a woman who had suffered great pain, yet with phenomenal dignity. She had given herself unselfishly to her children and provided a normal and supportive life for them when she had had every excuse to shut down. She had dedicated herself to nothing else but trying to keep her lineage healthy and secure. And here I was, angrily shouting accusations of selfishness and blame.

That's when I knew who I really was. I had always thought of myself as a good man, a man who would give of himself to help others. I had been willing to go the extra mile to make somebody else's life better. I had performed well as a heroic and sacrificial person; I had put my career behind the needs of my family.

All of these things were partially true—as long as my career got back on track, as long as people recognized my "extraordinary" work, and as long as Genevieve responded cooperatively and graciously. But after I heard myself shouting at my dear mother-in-law, I saw a large part of me that was harsh, unloving, demanding, and angry. It first took a clinical depression and then Genevieve to finally get the point across to me. I was a man who demanded the power to make things happen so they'd meet my goals, the need to control my own destiny, and the freedom to have things my way. I knew God had brought me to a confrontation with my own character, a confrontation that would result in my either pretending to be a hero or truly embracing the role of humble servant and caregiver.

WHEN LOVE IS DIFFICULT

The issue of Genevieve's alcoholism has long faded, since she no longer has access to the drug. But my experience with her helped me realize how difficult it is to love someone who cannot or does not respond. I began to see that it's often the very people who need to be loved and cared for the most who will not or cannot accept it. I now see that love does not have to see response, nor does it have to understand. Love simply loves. As James tells us, "*Religion that God our Father accepts as pure and faultless is this: to look after orphans and widows in their distress*" (James 1:27).

The royal law means caring for those who are unlovable, just as we wish to be loved. Only this kind of love demonstrates the kind of agape, altruistic love that is essential. It is this type of love that God demonstrated for us in Jesus Christ. Most of us greatly misunderstand what agape love is all about. Humanistic psychology in the last half of the twentieth century began to equate agape love with something called "unconditional love," or "unconditional positive regard." We began to think of agape as love that accepted the beloved, no matter what.

But while agape no doubt has this aspect of "acceptance," it is not the prime element. Instead, the prime element is self sacrifice. Agape gives, not out of abundance with plenty left over, but in a way that may leave it with little or nothing. One morsel of bread—I need it for sustenance, or I will die; you also need it to survive. Both of us stand on the edge of starvation. But agape causes me to look at you and say, "Take it and eat." I say this, knowing it means my demise. But I say it because I agape you.

Once I started to understand this, I no longer wanted to be a heroic man. Now I want to be a humble man who loves simply because this is what Christ does for me. It took me more than a decade to get that message, and it required leaving a position I loved; taking a job I hated; leaving a beautiful, forested land for a flat, ugly prairie; and saying good-bye to the accolades of professional colleagues in order to provide frustrating care to a needy and usually unresponsive old woman. But the exchange has yielded pure gold. The precious gift of the greatest lesson of my life is how to love as Christ loves me.

EMBRACING THE AGING PROCESS

It is indeed a struggle to take on the role of caregiving. But I believe caregiving in this generation is the yoke Christ has chosen to use to teach us a lesson that can stand the test of eternity.

Caregiving and old age are ours to embrace. They provide a path to peace. It is not an easy path, but as I have traversed this season of my life, the truths of my spiritual journey and my work have merged into one.

Relationships force reality on us. Reality, no matter the temporary pain it brings, is truth. And my relationship with Genevieve has boiled up the truth in me.

In the children's classic *Horton Hears a Who*, Dr. Seuss tells of a kindly elephant splashing around in the coolness of a pool. He's minding his own business and going about his day when something extraordinary happens. He hears, ever so faintly, a cry for help originating from a speck of dust floating by. He can ignore the speck but reasons there must be a small person on the speck, perhaps an entire culture, at stake. So he takes up the challenge to care for the civilization—at great cost to himself—even though he is the only one who can hear the plea.

Like Horton, we have our own business to take care of. Yet we hear this faint cry from our elders, "We are here." We can choose to ignore the plea, but most of us will take up the challenge of sacrifice and love because it is the only way we can truly live with ourselves.

Yet soon we may find that such caring costs us dearly. Our friendships begin to take second place, our financial picture may deteriorate, and our social connections may be hindered. But we also find it's not only the elderly person who depends on us; indeed, it is our entire civilization. It is in the very small cries for help that we find the measure of who we are—how we respond to the very least of these our brothers and sisters (see Matthew 25:40).

Self-sacrifice lies at the heart of a healthy civilization. It dawns on us that when we sacrifice ourselves for the good of the whole—or even the one—we work toward the greater good of humanity.

When we hear the soft whispers of our elders, crying for help, we may well be the only ones who will hear. But if we respond, we will be changed. And in providing care for our elderly companions, we will also be providing care for our own souls. We will not only strengthen and build our character, we will also strengthen our civilization. Sacrifice and humility—this is what caregiving is all about.

THE STRUGGLE CONTINUES

Yes, this is a story of struggle. It is the struggle to be weak when we desire to be strong, helpless when we want power, and sacrificial when we are selfish. But in the story of struggle,

we gain the greatest gifts in life. We receive gifts that mold and shape our characters, gifts with the power not only to change our relationships but the relationships of our children's children's children as well.

Do I love Genevieve perfectly? Certainly not. I've only just begun to learn about humility and the power that love has to change my heart. My heart does not change because she loves me; it changes because I love her. The gift of weakness, humility, and sacrifice is the gold we must seek.

Aging is life. If you have the courage to embrace it and to see what it can teach you, then let us share this time in the telling of our stories.

QUESTIONS FOR CONSIDERATION

1. What things do you hate about the aging process and your role as a caregiver?
2. Do some of the things you hate point to character flaws in you? If so, do they have the potential to help you grow?
3. How can you step over the flaw and head toward the redemptive part of aging that gives life?