



Carol O'Dell often appears on networks such as CNN and FOX.

## CNN past guest is in demand for her expertise on home care-giving

“Carol D. O’Dell, author of *Mothering Mother*, is now a regular expert on CNN and FOX TV. She speaks on living with Alzheimer’s and Parkinson’s Disease and elder care, making her a much-in-demand guest with the fifty million adults in America who are care-givers.” *Films and Books Magazine*

Why is Carol O’Dell popular? Aside from her expertise and humor, and her poise and ease on camera, care of the elderly is one of the most important top-of-mind issues today. Carol O’Dell’s “beautiful” book *Mothering Mother*—“told with humor, and much love” according to a Booklist starred review—speaks to the more than fifty million adults in the United States who have cared for an elderly or chronically ill loved one, according to the National Family Caregivers census. Nearly 75% of care-givers “go it alone” and need help, support, a sympathetic advice. (More statistics in appendix.)

Seniors over eighty-five are the fastest growing segment of our population. *Mothering Mother* author Carol O’Dell, popular speaker and past guest on CNN and Fox, is in demand for her humorous and helpful perspective on care-giving for elders and chronically ill.

“Carol O’Dell is a wonderful storyteller, both in her written work and in engaging, humorous presentations,” reviews Shannon Martin, the Director of Aging Wisely. “A must for any caregiver (past, present, future, family, neighbor or professional).”

Carol has given many television and radio interviews since *Mothering Mother* was released in April of this year. She is an ideal guest, literate, compassionate, humorous, poised and thoughtful. Her grasp of the problems of caring for the aged is deep and personal. Her book movingly and humorously chronicles the final months of her own mother’s life in Carol’s care.

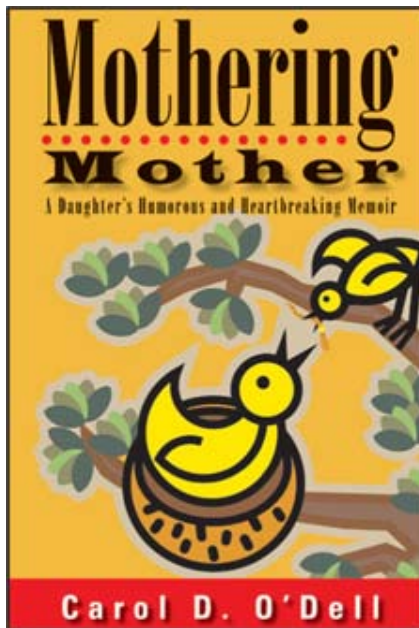
Carol is a passionate and articulate spokesperson on the subject of elder care, a subject of great and growing interest in the United States.

## Carol O'Dell available for guest appearances

We hope you'll consider Carol O'Dell as an expert guess for your programming on this important issue of elder care and care-giving for the chronically ill. May we send you a copy of her book and more information?

To view Carol's CNN interview and others go to her web site at <http://www.mothering-mother.com/>

To book Carol O'Dell for your programming, or for more information, please contact Kunati Publisher Derek Armstrong at 1-866-356-2442 (ext 288) or 647-273-5331. Derek's email is [publisher@kunati.com](mailto:publisher@kunati.com).



### APPENDIX

Booklist: "Beautiful, told with humor...and much love."

"O'Dell, a member of the "sandwich generation"—made up of boomers taking care of both their own children and their elderly parents—portrays the experience of looking after a mother suffering from Alzheimer's and Parkinson's with brutal honesty and refreshing grace. She peppers the memoir with scenes from her past, including meeting her adoptive parents ("The first time I saw Mama, I was four years old") and the death of her father. With three children of her own, O'Dell is torn in multiple directions, trying to be mother, daughter, nurse, cook, caregiver, maid, and more to five needy people. Mama's neediness is unrelenting, and O'Dell is at once bitter and sorry that her mother cannot be who she was. When the inevitable end comes, O'Dell wonders why she longed for the free time she now finds lonely and empty. A beautiful rendering of a difficult but all-too-common situation, told with plenty of humor, a touch of martyrdom, and much love." —*Booklist Review* by Mary Frances Wilkens

To read other reviews of *Mothering Mother*, visit [www.kunati.com](http://www.kunati.com)

## Statistics concerning elder care, Alzheimer's and Parkinson's disease.

- It is not just women finding themselves in the demanding role of care giving. Forty-four percent of caregivers are men. As our population ages, we must face this challenge and ask ourselves, "How will this responsibility affect our relationships and other aspects of our lives?"
- Nearly three-fourths of all caregivers "go it alone," receiving little help from other family members or the outside community. They often leave their careers, juggle other responsibilities, such as their own parenting roles, and sacrifice personal time in order to meet the needs of those they love.
- An estimated 4.5 million Americans have Alzheimer's disease. The number of Americans with Alzheimer's has more than doubled since 1980.
- More than 7 out of 10 people with Alzheimer's disease live at home, where almost 75 percent of their care is provided by family and friends. The remainder is "paid" care costing an average of \$19,000 per year. Families pay almost all of that out of pocket.
- A person with Alzheimer's disease will live an average of eight years and as many as 20 years or more from the onset of symptoms as estimated by relatives. From the time of diagnosis, people with Alzheimer's disease survive about half as long as those of similar age without dementia. Average survival time is affected by age at diagnosis and severity of other medical conditions.
- In a Gallup poll commissioned by the Alzheimer's Association, 1 in 10 Americans said that they had a family member with Alzheimer's and 1 in 3 knew someone with the disease.
- Increasing age is the greatest risk factor for Alzheimer's. One in 10 individuals over 65 and nearly half of those over 85 are affected. Rare, inherited forms of Alzheimer's disease can strike individuals as early as their 30s and 40s.
- The number of Americans with Alzheimer's disease will continue to grow – by 2050 the number of individuals with Alzheimer's could range from 11.3 million to 16 million.
- Finding a treatment that could delay onset by five years could reduce the number of individuals with Alzheimer's disease by nearly 50 percent after 50 years.
- National direct and indirect annual costs of caring for individuals with Alzheimer's disease are at least \$100 billion, according to estimates used by the Alzheimer's Association and the National Institute on Aging.
- Alzheimer's disease costs American business \$61 billion a year, according to a report commissioned by the Alzheimer's Association. Of that figure, \$24.6 billion covers Alzheimer health care and \$36.5 billion covers costs related to caregivers of individuals with Alzheimer's, including lost productivity, absenteeism and worker replacement.
- Half of all nursing home residents have Alzheimer's disease or a related disorder.

- The average cost for nursing home care is \$42,000 per year but can exceed \$70,000 per year in some areas of the country.
- The average lifetime cost of care for an individual with Alzheimer's is \$174,000.
- Medicare costs for beneficiaries with Alzheimer's are expected to increase 75 percent, from \$91 billion in 2005 to \$160 billion in 2010; Medicaid expenditures on residential dementia care will increase 14 percent, from \$21 billion in 2005 to \$24 billion in 2010, according to a report commissioned by the Alzheimer's Association.
- The Alzheimer's Association has awarded more than \$185 million in research grants since 1982, according to our audited annual financial statements.
- Parkinson's disease affects over one million people in the U.S., more people than Multiple Sclerosis, Muscular Dystrophy, and Lou Gehrig's Disease combined.
- Every year there are 100,000 new cases, or 20 per 100,000 people, the incidence rising with age.
- At present 1% of the population over 50 has Parkinson's. This number will increase in concert with the number of older people. In 1900 there were 3.5 million people over age 65; in 2000, there were 35 million (worldwide)
- The annual cost of Parkinson's disease in 1997 in the U.S. was estimated to be \$24,041 per patient, with an aggregate annual cost of \$24 billion. The pressure to provide cost effective services is mounting.
- One person in 200 will get Parkinson's Disease during their lifetime with the risk increasing with age (1 in every 100 persons over 60 has Parkinson's). The disease is more common in men than in women.



## Excerpt of one of Carol O'Dell's interviews:

### What was the hardest part of writing *Mothering Mother*?

Writing *Mothering Mother* was challenging and cathartic. My situation as daughter and caregiver on top of other responsibilities was at times unbelievably stressful and bringing that physical and emotional pain to the page was an act of discipline and healing. Writing is a type of meditation, I suppose. It was tough to relive certain aspects of caregiving—both the sweet and bittersweet memories. I find that writing is emotionally exhausting but necessary if the work is to be of any worth.

### What made you decide that your mother should live with you?

From an early age, I had made a promise to my mother and father that I would care for them. My mother always had a fear of being put in “one of those homes.” I’m a big proponent of family. I think we should stay close to our loved ones at least for as long as it’s possible. I chose to rearrange my life, and had the family support to create this. Realistically, I understand that some diseases take a toll and it may become impossible to offer home care. You’re still caregiving when you’re overseeing a loved one’s care—and there are stresses and challenges that accompany that situation as well.

### Did you ever regret that decision?

Only once, when our youngest daughter became ill and had to be hospitalized. I felt I had not caught the symptoms in time because I had been so focused on my caregiving responsibilities. Now I realize that I could have employed more help, but it was also about the mental climate of my home and how Alzheimer’s had pervaded the atmosphere. It’s very, very hard to stay above the emotional pull of this horrific disease. At that point, I began to seek more help and to consider a care facility, and it was also at that time that my mother took a turn for the worse.

### Would you consider you and your mother close?

My mother and I and my family in general are like anyone else’s—with a tangled history, hurts and complications mixed in with love and compassion. Close is really a non-issue when it comes to caregiving. Caregiving is about integrity. It’s about the person who chooses to step up, take responsibility (and there are many ways to do that—financially, medically, emotionally, being the primary caregiver, one of many caregivers, or overseeing their care).

I did not take care of my mother because we were close. I did so because it was the right thing to do. Because we’re family. Because of the example I needed to set for my own children, and primarily because I have to get up and look in the mirror each morning.

### What would you suggest to mothers and daughters who say, have unresolved issues?

Like many family members and caregivers, and thought I would have opportunities in those last years, weeks, months to “make things right.” I thought we’d have those heart-to-heart talks, forgive, get all cozy and feel at peace with each other. Did we? Yes, though not in the traditional sense, but in small, quiet ways. I’d suggest that the best thing for mothers and daughters, fathers and sons, etc. to do is to simply accept each other just as you are. Illness, aging, and dying is not the time to try to fix things. It’s the time to love and simply be loved.

Was this experience somehow different because you were adopted?

No, I don't think so. We were a family in every sense of the word. I did and do feel a deep sense of gratitude for being adopted, but not in an obligatory way.

In your situation, there were no other siblings involved, but do you have any advice for those who are facing similar situations but have siblings to consider in the various decisions of caregiving?

I speak to Parkinson's, Alzheimer's, bereavement, and professional groups around the country, and I talk to many caregivers who are at odds with their siblings over issues of care. I know this can be a very hurtful situation. My advice is to accept the role you're in—if you're the primary caregiver because of your nurturing personality, or medical experience, or proximity to your loved one, or simply because no one else wants this responsibility, then accept this. Let go of your expectations of others. Offer mercy instead of demands. Most people recoil from caregiving not because of selfishness, even though it may appear that way. It's usually fear: fear of intimacy, fear of not doing a good job, and the biggie—fear of death.

There's nothing wrong in communicating and stating clearly what you need, ways that even long distance siblings or family members can still participate, but if they choose not to, then let it go. The inevitable fact is that most caregiving will eventually end in the passing of our loved one. There's no reason to lose two family members.

What have you done/how have you felt about your relationship with your mother and the writing of this book since her passing?

Each day, and every time I give a presentation or speak to people at booksignings, I learn something new. I learn something about myself and our relationship. I'm more appreciative of my caregiving experience as time goes on, and even though I haven't forgotten how very difficult it was at times, I'm grateful for the experience.

There are many personal aspects to your book, places where you and your mother are vulnerable in your thoughts and actions, were you ever concerned how people would react to this?

I wrote *Mothering Mother* as an act of survival. I wrote it because most of the caregiving related books I found were medically based and rarely touched on the personal ramifications as we come back together as family. I was a healthy, active vibrant 39 year-old when I chose to care for my mother full time. I still had (and have) a mind, body, heart, intellect and creative spirit that needed challenging.

I needed someone to be honest with me about the nitty-gritty side of caregiving, not the physical side per se, but the terrible, awful thoughts you have in moments of sheer desperation, well as those life-altering/decisions you are sometimes required/demanded to make in the course of caregiving that define you as a person. That's why I wrote the book, to work through these head and heart issues, and to hopefully offer insight and comfort to those in similar situations. Aspects of *Mothering Mother* are for everyone. It's about our relationships and how they define us. Many of my readers are not caregivers, they're simply readers who enjoy a good story and they understand how to apply these life lessons to their own situations.



I had to come to grips with “what will my mother/family/neighbors think of me.: After deciding that *Mothering Mother* could do more good than harm, and could help other caregivers feel less alone, I was able to be less concerned about what people thought of me. I wanted others to laugh and cry and accept their lives, and risking my own vulnerabilities in order to relieve the stress and struggles of others seems like a good reason.

In writer terms, I decided to offer my emotions in real time—and wrote in vignette style (since caregivers are exhausted and are constantly interrupted). I created brief stories that would still fit into an overall story arc that would be a satisfying read as well as helpful. Writing engaged my intellect and creativity while I was in the thick of caregiving. I needed that. I needed to be able to think, analyze, observe and reflects.



## A sample from *Mothering Mother*

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### Other Days

On a good day, Mother shuffles around with a fair gait, surprising us all. Parkinson's is like that. The way I understand it, the brain stops producing the dopamine it needs to jolt the tiny charges that connect synapses and allow thought and movement to synergize. So, sometimes Mother can walk pretty well, and other times, she's frozen or jerky. We're grateful for the good days when she explores the house, the furniture and whatnots, as if browsing in a fine department store, acting like she's never seen these items before. I often find her standing in my pantry, hand deep in the Cheeze-Its.

Other days—bad days—I hear her faint call from her apartment at about eight in the morning. I am not Miss Cheerful in the morning and avoid all conversation until at least nine, sometimes ten, not until my two cups of coffee have made a full lap around my bloodstream. I rise from my couch after her third call, lay my journal on the table, sip one last drop of the divine, and allow myself to become her human walker. She claims that canes are useless and walkers are cumbersome and, after her many attempts to get them to do as she commands, she winds up tossing them across the room.

I have agreed to stand beside her, her fingers digging into my wrist as she hovers frozen in her bedroom doorway. Changes from carpet to tile, walls to doorjamb, shut down the delicate firing pistons. And so we stand here, silent, shaking and waiting.

I try to treat her when the Parkinson's flares up as I would a stuttering child, with patience and tenderness. She's broken out in a sweat as she's attempted to walk from the bed to the doorway. I close my eyes, still half dreamy, nestled in thoughts of my own bed. I swoon and remember where I am, still waiting for her to move, my head tilted and rested on the doorframe.

After her medication kicks in, she toodles around her apartment rearranging this and that. She loves to whistle and is quite good at it. I like hearing her whistle because it means she's in a good mood. Sometimes she'll come over to my piano and play. She played in church for years and years. Her repertoire

Top: Carol C. O'Dell

Bottom: Carol's mother before Alzheimer's changed her life.

**“An emotional and delightful in-the-room view of a daughter's struggle to care for a dying parent.”**

Barry Baines, M.D.

Author of Ethical Wills



Carol O'Dell and her mother at the time of *Mothering Mother*.

*Mothering Mother* is an honest, well-written contribution to the literature of parent-care, serving, as memoir often does, as a cautionary tale of how the best intentions are not always enough. *Florida Reviews*

"Carol O'Dell is my new heroine."

Casa Publishing

consists of old hymns and a few hits from the forties. Her cascading runs hide the occasional mistake of the damaged pinky finger. When she plays, this serene look comes over her face, and I hope she's imagining she's some place else.

I ask her if she'd like to play me a song, but she says she wants to read the morning paper. I help her to the chair, get out the bowl, put in cereal, slice the banana, and lay out a spoon. I slip the paper out of its green plastic wrapper and lay it on the table then walk back to her nightstand to get her glasses. I stand next to her and hold out her glasses. She tilts her head to the side, indicating that I should put her glasses on for her. I take the arms of the glasses and glide them past her hair and around her ears, then position them on her nose

"When I get me a stove I can cook my own meals," she says, looking up at me.

I haven't found a way to tell her that I don't think it would be a good idea for her to cook. I'm afraid she'll catch herself on fire, or an oven mitt, and burn down the house. I avoid the subject, but she's getting annoyed.

I put a large towel in her lap; milk on a spoon has a way of ending up on her gown. She eats while I unpack. She must wake up lonely because that's when she asks me a myriad of useless questions.

"You're moody in the morning, do you know that?" she asks.

"You think so?" I'm being facetious.

"I'm the same all the time."

You can say that again.

I turn on the TV to a Christian station. She perks up, content with breakfast, paper, and a preacher to listen to. She's anxious to go to church. She asks me several times a day. I tell her we'll find one soon. I'm still trying to find my socks.

## *Mothering Mother* Book Information

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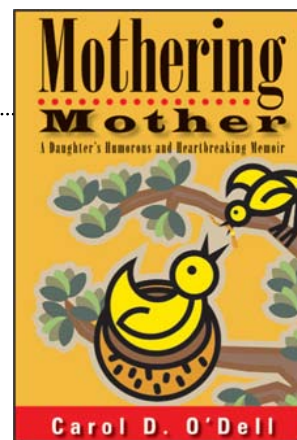
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