

The Alzheimer's Podcast

Episode 139: *This is Going to Impact Your Family*

Christy Turner, CDP: I think a lot of times people think I yammer on about this because I'm just somebody who can't live in the moment. Not true. Because this is going to impact *your* family. Maybe not today, maybe not tomorrow, maybe not next week, but it *is* going to impact your family.

What do you want that to look like?

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You're listening to *The Alzheimer's Podcast* with Christy Turner of Dementia Sherpa, where we're all about bringing the Good Stuff --that's respect, kindness, love, empathy, and compassion--for people living with dementia, their families, and the professionals who support them.

I'm Christy Turner, AKA The Dementia Sherpa. I've enjoyed the privilege of working with over 1,500 people living with dementia and their families so far, including multiple experiences in my own family. In the course of my career, I've transformed from total train wreck on my first day as a professional to local go-to expert, speaker, trainer, and consultant. And if *I* can go from scared spitless to confident care partner, I promise *you* can, too!

Christy: Hello and welcome! I'm chronically at least six weeks behind in editing episodes, but it turns out there's an upside to that. During this pandemic, things can change dramatically in six weeks. Although I typically edit out the chitchat Phil and I engage in before we officially dive into an episode, I've decided to leave it in for a little slice-of-life flavor in the Covid-19 era.

I call it *Adventures on the Prairie* because at the end of March, Michael and I decamped from Portland, Oregon to our little mini-farm in a teeny, tiny town in middle-of-nowhere rural New Mexico. That's the beauty of podcasting and working with clients via Zoom, telephone, texting, and email.

Phil and I recorded this episode May 19, 2020. We were supposed to record the previous day, but Michael came home with a truckload of bananas that required my immediate attention.

Phil: Any second thoughts about leaving Seattle for the sunshine?

Christy: No, 'cause it was just Portland.

Phil: All right. Whatever. Oregon. Any questions about leaving Oregon?

Christy: No, no. Still very happy to not have people right up in our grill.

Phil: Okay. I can understand that, I suppose.

Christy: Okay. So, that truckload of bananas turned into 200 cups of mashed bananas.

Phil: Can you freeze mashed bananas?

Christy: Yeah. What we found out after is that there is a freezer shortage. I'm not even kidding. [It's much like the bicycle shortage.](#)

Phil: Right.

Christy: And so Michael thought, *No big deal*. He'd just go buy another freezer. Nope!

Phil: Nope!

Christy: The local appliance store said, "Well, we have a waiting list and we're hoping that the manufacturer is going to be able to start fulfilling orders in mid-June." So, I found a place three hours away that is converting--an appliance store that is converting refrigerators to freezers.

So, Michael put away all the mashed bananas, and then he was like, "I need more space, so I'm gonna take out these two bags of whole chickens." Okay. Great. Well, he cooked one overnight. And now he's got all of this broth.

Phil: Right. Which needs to be frozen.

Christy: Apparently, that's what he was thinking. He was going to freeze it. I was like, *No, no, that has to be canned. We don't have room in the freezer.*

"Oh, yeah." Yeah. So, that's *Adventures on The Plains*.

Phil: Besides his *because he could* reason for buying 6,000 bananas, was there any real, more specific--like, "It was an amazing deal," like, "I wanted a banana and you know, it was five for \$1 or 500 for \$2?"

Christy: I love to bake and to cook. I find both really relaxing and like almost a spiritual experience--

Phil: Ya didn't sound that way yesterday.

Christy: Yeah, right. That was a little different. I think I told you, now I'm a master of the [no-knead bread](#). I've taken that recipe and made a sweet bread out of it. I've made-- not the sweet bread, like the technical name for [that actually involves](#)

[something gross with meat](#). But I'm talking about, like, I put in dried apricots and nuts and stuff like that. So, that was really good. I also did one where I put roasted garlic in it. That was really good. So, I've done variations on that. The classic, I've done a bunch of that. I've made [homemade tortillas](#), homemade [potato chips](#), homemade [tortilla chips](#), pasta sauce by the gallons. Lasagnas, enchiladas. I've made homemade enchilada sauce now, both green and red.

Phil: I'm hungry.

Christy: Yeah, I'm feeling like there's something I'm leaving out. Oh, lots of peanut butter cookies. Every variation of that. And then also banana bread. I could, you know, maybe put it out on a little coffee cart and have banana bread. Michael is always one who looks for ways to monetize things.

Phil: Okay.

Christy: So, what that deal was, a couple of weeks ago we'd gone to the grocery store and there were ripe bananas in a bag. And so it was probably like, I don't know, dozen and a half to a bag for 99 cents.

And so we got, I dunno, five bags or something. And so I made some banana bread and then Michael started thinking bigger. And so he went to the grocery store and said, "Hey, I don't see any spotted bananas out here. Do you have any in the back?"

And the produce manager gave him what turned out to be 433 bananas. He got 433 bananas for \$23.60.

Phil: Okay. That's pretty cheap.

Christy: That is pretty super cheap, which is why we had 433 bananas we needed to process.

Phil: Which is now why you have to go drive six hours to get a freezer they're probably going to charge you extra for since nobody else has them.

Christy: I feel like you've nailed it. Yep. You got it.

Phil: I haven't seen the freezer shortage story in *The Times*. I should suggest it to someone.

Christy: You really should.

Phil: How much longer do you give your marriage?

Christy: Oh, we're having a good time.

Phil: Oh, okay. Alright. I was saying to my nephew that if we were still living in the little house--we had a little house for a while that we had gutted and rehabbed, and

we moved into it with the idea that we were going to downsize. And then when I got my diagnosis, I said, "You know, I'm going to be home. Not good, too small."

So we had actually not been able to sell our big house and had rented it out. So when that lease ran out, we moved back up to the big house. And, I said to my nephew, "If we were in that small house now, and in this situation we are in now," I said, "there'd be blood on the walls."

Christy: You weren't kidding, though, 'cause you're not laughing.

Phil: No, I wasn't kidding. I mean, the idea that--I mean, it's funny. I also recently thought that, you know, people who live alone or not in relationships, that kind of stuff, what they must be going through. But then the opposite of so much togetherness, right?

Christy: I think it's one of those *the grass is greener*-type situations.

Phil: I mean, I couldn't imagine what it would be like by yourself. But I also, you know, if we didn't have the separation that we have in our big house, I don't think it would be pretty.

Christy: There was a 10 year stretch where I was single and I do remember there was one point--and this was before I got Zen about it, but this was the breaking point before I got Zen about it--where I remember saying to my sister, "Not even the Mormons will come to my door! Why, why?"

Phil: "What is going on?"

Christy: Yeah. Yeah. So, you know, I could have easily ended up part of the LDS church or Jehovah's witness, or--

Phil: Right, right. If any had dared come to your door.

Christy: If anybody had shown up to the door, they would have been either delighted or creeped out. 'Cause I would have been like, "Come on in, have a seat. What would you like to drink? Here's what we're having for dinner."

I'd be like Kathy Bates in *Misery*, except not hobbling anybody, but like, "You're staying here now."

Phil: Right, right, right, right: "I'm lonely!"

Christy: Yeah. I think, definitely for people that are single and wanting to be in a relationship, it's probably tough.

Phil: Yeah. Yeah. Yeah. Tim even says that he's an introvert, which go figure, but--

Christy: Bless his heart.

Phil: I would've never guessed it, but okay.

Christy: Yeah, me either.

Phil: Yeah, but okay. Whatever. But he's like, "Even I have reached my limit of being by myself."

Christy: Yeah. Has he run out of projects to do?

Phil: Pfffftttt. Ha ha ha ha.

Christy: No?

Phil: No. No, we could continue for--we could live for another 25, 30, 40 years and there would never be a lack of projects.

Christy: Okay. So he has run out of interest in doing projects.

Phil: "Run out," that's an interesting word. Did he ever really have interest in the projects? What can you do? We all, we all have our good points and our bad points.

Christy: I've heard that.

Phil: I'm trying to become very, what's the word? Zen, I guess. I'm trying to become very Zen in my old age. I find it really helps.

Christy: So, how are you becoming Zen?

Phil: Just like, you know, doing my thing. Doing what I have to do. Trying to--

Christy: And what are you doing right now? Are you cleaning out your desk, or--?

Phil: As we're speaking, you mean?

Christy: Yeah, 'cause you're doing something. We can hear it.

Phil: You hear it?

Christy: Oh, yeah. Yes, we can hear it.

Phil: Oh, I'm sorry.

Christy: I think everybody who listens to the show understands by this point you are indeed a multitasker.

Phil: I can't just do one thing. I really can't.

Christy: We know.

Phil: It makes me twitchy. What were we talking about? Also, my short-term memory is going completely. What were we just saying?

Christy: We're talking about what specific things you're doing to become more Zen.

Phil: Oh, right. You know, I just, I have my books, I have my--you know, if I feel like watching something, I've learned Netflix. I've learned the Netflix! I've learned it.

Christy: Congratulations.

Phil: Thank you. I'm very, very excited to enter this century. And, but I have my books and my, you know, my newspaper. I have my iPad, basically. You know, my life is my iPad. This morning, let's see, I went to a nursery, a supermarket, Home Depot, Staples, and Costco.

Christy: Wow. So, you had a really busy day.

Phil: I just did a lot of stuff. I returned stuff. I got stuff off our list.

Christy: And you're obviously feeling safe to be out and about.

Phil: I have my mask on, you know, that's--

Christy: You are the king of the masks.

Phil: I, you know, I have my mask and I feel, I feel comfortable with my mask. I think if I didn't have my mask, I wouldn't go out. But I have my mask. And now you don't go into a store without a mask anymore. So everybody else has a mask. I actually found some hand wipes in one of the stores, so I'm going to keep that in my car.

And 'cause the only thing I had been a little creeped out about is the carts. Costco does, um... *fertilize* is not the right word. What do they do to them? They clean them. There's another word for it.

Christy: Sanitize.

Phil: Thank you. You like *fertilize*? It was close. It was close. So, but the other places don't, so, I think I'm going to keep one of those things in my car and then when I go someplace, just grab one and wipe the thing down.

But yeah, that to me, I mean, it's not like we live in New York, you know? It's not like it's everywhere here. And I very much feel like with precautions, it's okay. And I could not, I could not *not* do these things. I'd lose my mind.

Christy: So it's a good thing you all don't live in New York, is what you're saying? New York City.

Phil: Oh, I can't imagine it. I don't know how those people survived. I really don't.

Christy: I was talking to a friend that actually I'm going to have on the show, I'm recording with her tomorrow morning. And she's a RN and she is, I would say, pretty much where you are just as far as like, *Nope, this is no way to live. You can't just not be out and about. There are the realities of living life and maintaining mental health. And you can't just be trapped in your home nonstop.*

Phil: And as long as you're being smart, I think there is a happy medium. I mean, no, I haven't figured out restaurants yet. I'm still not quite sure what they're going to do.

Christy: Go out of business, mostly.

Phil: But, you know, in terms of, well, you know, I think there are some restaurants, you know, the idea that they have the booth separators, you know, with the, that makes great sense to me.

And, you know, the waitstaff is going to have to wear masks, obviously. But, you know, the restaurants that have counters or bars or stuff like that, where they make all their money. I don't know how the hell they survive. And those are some of our favorite places around here.

I definitely, I think we're going to change. Society is going to change. We don't quite know how yet, but some of the things that we're doing make sense to me, right. You know, I'm writing a piece about telemedicine for BeingPatient.com. Kind of a first person thing, because I had my appointment with my neurologist on the phone and I did a primary care appointment on the phone.

And I was talking to a guy yesterday, who's, I can't remember the name of the company, but basically they do telemedicine. That's what they do. And they're a national network of tele--doctors who do telemedicine. And, you know, I was just saying, you know, what's the worst place in the world to go, if you're not feeling sick? A doctor's office, 'cause there're sick people!

Christy: Right.

Phil: And you know, I actually found--and I was surprised to find it, but I actually found the Zoom calls or whatever system we used with the doctors, surprisingly intimate. And actually more satisfying than when you sit in their doctor's office.

Christy: Really?

Phil: Yeah, I mean, my neurologist in particular, it was like talking to a human being instead of a doctor. And I don't know if that was because he wasn't surrounded by his diplomas, he wasn't wearing his white coat, you know, all that stuff?

My primary care doctor is very personable anyway. So going to see her is always a pleasant experience and she was great on the computer. So, I didn't really notice that much of a difference with her.

But the neurologist, it was, you know, completely a different experience, and a much better experience.

Christy: I've heard that so many times over the years. People tend to really appreciate and actually enjoy the time that they end up spending with their primary care physician and just want to smack their neurologist. And it always comes back to bedside manner. Or lack thereof.

Phil: Right. I mean, my neurologist is great. We've run into each other at conferences and stuff like that. He's always very nice. And actually in San Diego [at the December 2019 conference discussing the Biogen phase 3 aducanumab study pause and resumption], he kind of, when I ran into him at a coffee break, he was the one who kind of talked me down when I was about to lose it.

So he's a great guy, but there's something about the setting. And also down at Penn, which is, you know, packed full, always. But they're always on the move when they're in the office, you know, they're always running from patient to patient.

And this felt very stable. We talked. It was good. It was a good experience. And this doctor who works for this company, he said--you know, I mean, he's very much a salesman, so take everything with a grain of salt--but he said that actually, that they're working with a Harvard professor, they took all the comments that they get in, you know, the reviews and stuff like that.

And he said they've gone through and assigned or, not assigned--quantified. Like, somebody talked about the relationship. They gave that a number so they can quantify the results and make it less anecdotal. And they're working with a Harvard professor to do a paper about it.

And he said the number one thing that people said, and many of them were very surprised, was they enjoyed the relationship with the doctor that they were able to develop with a telemedicine [appointment]. So that, that clearly is going to, I think, be a--I think we were going that way, anyway, and now this has really made that faster.

And I asked him, you know, in terms of sort of people, older people living by themselves or, you know, can't, aren't very mobile. I said, can you actually have like, have their kids there, their children on the phone with them or on the Zoom call while they're talking with their doctor, even if the child lives, you know, in Seattle and they're in Pennsylvania?

He said, yeah, we can do that. Which is also kind of a very interesting development, right? I think that's a good thing.

Christy: If people decide to allow their kids or their partner to be a part of the appointment, for sure.

Phil: Yeah. Well, yeah. If they want to. I think that kind of stuff is going to change for the better. You know, I wonder what's going to happen with memory care facilities and assisted living facilities and stuff like that, [as I've written](#). I don't know what's going to go on there. And the news just continues to get worse and worse and worse.

Christy: Absolutely.

Phil: Canada's reporting, what, 70% of their deaths from COVID were in nursing homes, some ridiculous number like that.

Christy: I didn't see that.

Phil: Yeah, it was in *The Washington Post*. I read two outlets and I can never remember which is which.

Christy: I know. We read the same two, and I have a story on each pulled up, both specific to long-term care. And the piece in *The Post* is from day before yesterday [May 17, 2020], [talking about LifeCare Centers and looking at the broader context](#). And, you know, I just, I read that and it breaks my heart into a bazillion pieces. All of it.

Because one of the examples that was cited was in one of the survey reports, where there was a deficiency--and I might be slipping into geek-speak there. So, a deficiency on a survey report is when the surveyor finds you are deficient in whatever the rule is. And so this particular deficiency was a CNA [Certified Nursing Assistant, also sometimes called *nurses' aides*] had her face 12 inches from a resident, and she wasn't wearing a face mask and the resident was coughing.

Having been through good surveys, amazing surveys, horrific surveys, a survey that was so bad that it almost put me out of long-term care, like two years in [to my career], it was so brutal, I get it. From every angle.

But you know, one of the things is, I'm reading that going, *Huh? And did the surveyor take out a tape measure? How'd you arrive at that conclusion?* And this is another thing that has always bothered me about the survey process--and it is very different in Oregon than it is in California, and again, because we have 50 healthcare systems in the United States.

But something like that? I mean, that was cited as a deficiency, saying that it essentially could cause harm to the resident or to the CNA, right. Something like that, I find it unethical for a surveyor not to say, "Hey, hold on. Wait."

Phil: Right. "Get a mask on, people."

Christy: Yeah. And so, and that was my next question: [were there masks available in that community?](#)

Phil: Right.

Christy: And my next question--and this is something that I think you need to have some experience being in the situation to fully appreciate--is, we don't know what the context for that was.

Because I have personally witnessed and been part of, you know, you're walking down the hall in pursuit of doing something else or on your way to so-and-so's room and then Bob starts choking, or you hear Bob start coughing. Well, you drop what you're doing. You're going to run to see, *Is Bob okay?*

Phil: Right.

Christy: That's the instinct. That *better* be the instinct. You've got a bigger problem if you have staff that keeps walking and doesn't give a rip. So, what was the context for that [cited deficiency] happening?

So that's one possibility, right? I've also seen situations where a CNA got 12 inches, approximately, from a resident's face just 'cause they were being a jerk.

Phil: Right.

Christy: And that was an immediate, *Whoa! What are you doing?*

Phil: Just because they could.

Christy: Right. Well, in the situation I'm thinking of, the CNA was supposed to be assisting a resident with dining and was in fact not sitting at the table with the resident, which is the proper way to do it, but was instead standing over the resident.

There's no need to be a foot away from somebody's face when you're assisting them with eating. It was a power play. It was dealt with immediately. It was on the spot, *This is not who we are, this not what we're about. This is not a fit.*

Phil: Right. [I found that story in The Post. I was wrong. It's 81% of the deaths are in long-term care facilities.](#)

Christy: In Canada?

Phil: In Canada.

Christy: So 81% of COVID-19 deaths, 81% of Canada's have happened in long-term care.

Phil: Right.

Christy: We've talked about this before and I, and of course I'm still waiting with bated breath to find out what the actual numbers are in the US regarding long-term care, and betting all future earnings that they are in fact much higher than we think they are [right now](#). [Note: This is the most recent reporting: [More Than 40% of U.S. Coronavirus Deaths Are Linked to Nursing Homes](#) (July 7, 2020)]

Phil: Yep.

Christy: Typically you have traveling teams, right? You have the care managers, you have the hospice team, you have the home health team, you have the entertainers that go to different places.

And then you also have companies--and I don't think we talk about *this* enough--you have companies that limit the hours their employees can work. Typically, their lowest paid employees. So we're talking about, usually, CNAs or, you know, care staff, direct care staff, limiting them to 35 hours, so that they're not full-time so that they [the companies] don't have to pay benefits.

Well, guess what? Those people have to find another job.

Phil: It's crazy.

Christy: Because whether they're getting benefits or not, they still have bills to pay.

Phil: Yeah. Right.

Christy: And we're talking also about a category that is in the throes of a chronic shortage of staff. Let me be perfectly blunt, when there was three and a half percent unemployment, all the people who wanted to be in that line of work pretty much already were.

Phil: Or were immigrants and couldn't get green cards or whatever.

Christy: Immigrants traditionally have been a fantastic source of the caregiving pool. A lot of times it is because of their culture of origin, where families take care of their people at home. So they have fantastic experience in caring for someone. We're not doing ourselves any favors as a society, looking at addressing the shortages in

long-term care, the staffing shortages in long-term care, by eliminating one of the best sources of the labor pool.

Now that unemployment is what, 15%, roughly?

Phil: 20, 25% is what I think they're expecting, maybe 30.

Christy: I think we're all understanding that 15% is something we will aspire to at some point down the road.

Phil: Right.

Christy: But just because that number has gone up, that doesn't mean--it's not a matter of just saying, *You don't have a job right now, and long-term care really needs people. So, boom!* you start doing that.

And honestly, as family members, we need to think really carefully about that. Do we want somebody who used to be perfectly happy working in some other line of work that has nothing to do with healthcare, for them to feel forced into a situation where, *Well, that's the job that's available, so I guess I'll do that.* Do we want people who feel like that to be taking care of our parents, our grandparents, or our spouses? I hope the answer is, *No.*

Phil: Seems to be, *Yes.*

Christy: Even right now, among people who are willing to do this type of work, that's not enough. There are people who shouldn't be doing this type of work because they are not good at it. They were not born to do it. They do not have the empathy chip. And certainly that's the minority, but that needs to be weeded out. We don't need to be adding to that pool.

Phil: I don't know what the answer is. I mean, Trudeau is quoted in the story in *The Post* saying, "We have failed our elderly." And then there's somebody quoted saying, "I've been beating this drum for 20 years."

And then Pennsylvania just released the names and numbers of people who have died, in which facilities, and which long-term care facilities. And I mean, there are some of them that, you know, have 20. There's one study that had 43 deaths. Just like it's, it's, it's insane. And it's like out of, I don't know.

I don't know. It's really scary. 41 deaths, Lackawanna County. I don't know why, but Lackawanna County has been really hit bad with deaths in long-term care facilities. And it's like, what, were they all owned by one company or something? I don't know.

Christy: The company is always, certainly, going to have some part in it, because what systems are in place? How seriously do they take training? And keeping current on training and making sure that everybody's skills stay sharp? And what is the

company culture? So that's certainly a part of it, but the other piece that's going to be really important is always going to be the geography.

If you have an area with five long-term care communities--and most places have well more than that, but obviously if it's a more rural area, five might be like, *Oh my God, the choices!*--but let's say there are five and you have one that has a pretty serious outbreak.

You need to immediately assume you've got a problem in the other four.

Phil: Right, right.

Christy: And community spread outside of that. Because again, when we live in a culture that values professional athletes and professional entertainers far more than people who take care of our grandparents, our parents, our spouses, those people are not going to get paid their true value.

There's too much of a disparity. I've been enjoying *The Last Dance* [[the ESPN documentary about the last year Michael Jordan played for the Bulls.](#)]. I'm old enough that I got to watch Michael Jordan live on the TV as he was creating history and pulling off miracles.

Phil: Right.

Christy: Wow, what a talent! So amazing! I also am old enough to remember being able to watch Wayne Gretzky on TV. I've seen Jerry Rice. I've seen the greatest of all time. Michael Jordan, Wayne Gretzky, Jerry Rice. And, you know, I was happy in the moment and I have fond memories. And they made millions of people happy.

But what they did is substantially different than taking care of people we love. It does not have the same value. Entertainment does not have the same value. And yet from a financial standpoint, we give it far more value.

Phil: Right.

Christy: And until we, as a society, decide that we are going to value the people who are actually doing the work in the trenches, it's not going to change. As long as, as fans, we continue supporting the sports, supporting the movies, you know, it's just not going to change. If we stop giving our dollars to those things, eventually the players are not going to be paid as much. There's some opportunity to change.

Certainly there are struggling artists. Certainly the US women's soccer team is not getting paid their due. However, looking at the big picture, we are showing, the death rate is showing, the infection rate is showing, what it is as a society we truly value. And it's an ugly story.

Phil: It's an ugly story and I don't think it, I don't think it has to be an either/or. I mean, you can pay Michael Jordan as much as you want to pay Michael Jordan, but you then ask Michael Jordan, through taxes, to pay back into the society that is so valuing his worth. And to pay a percentage that makes sense, that makes all these other things possible.

I think it was Nick Kristof in *The Times* who wrote a piece about Denmark, I believe it was, where people pay 19 cents more per dollar in taxes than we do. And [the list of benefits they got, including paid sick leave, maternity leave, national health care, it just went on and on and on and on.](#)

And you think, alright, 19 cents on the dollar. That's a lot more than we're paying now, but what are they getting for it? And you know, if you were to say to somebody, *Okay, here's what you could get if you would agree that we should pay x amount more on taxes, versus everything that you have to pay for yourself with that 19 cents*, it becomes a no-brainer.

Christy: For people who think like you, it becomes a no-brainer.

Phil: Right. And then you have people--I just read that [Jeff Bezos is going to become the world's first trillionaire.](#)

Christy: Yeah, I saw that, too.

Phil: That's a billion billions, right? Am I right there? Maybe not. [A million billions](#), I don't know, whatever. It's a hell of a lot of billions.

Christy: Yes.

Phil: And how can he be allowed to accumulate that kind of wealth when so many people are hurting? Okay, I guess I'm sounding like a socialist, but--I never thought of myself as a socialist--but....

Christy: I don't think you're a socialist anymore than I'm a socialist. But what I will say is I think that this comes down to in the United States, there's been roughly 30 years of an echo effect, [an amplification and an echo effect](#)--of a certain ideology that holds that not every person deserves the benefits that you're talking about.

So in the United States, we look at worthiness and you have to prove your worthiness in order to get certain things. And we go back to that "pulling yourself up by the bootstraps" business. And here we are.

Phil: Yeah.

Christy: That is what has softened the ground to say, *It's okay to open up the economy and if it takes out Grandma in the meantime, that's a bummer but Grandma was not contributing.*

Phil: Yeah.

Christy: It's a lot of things, right? It's the fact that we still do some things, even though it gets a result that we're not in favor of. It's also, I find this really amazing that it hasn't clicked for more people, but we are putting ourselves in a position where we're really hoping that we have enough benevolent billionaires and almost trillionaires in the United States to help us.

Phil: Yep. Right.

Christy: I guess we're an awfully optimistic lot here in the US.

Phil: We used to be. I don't know.

Christy: Well, we're full of hope, aren't we? Seems to me that there are an awful lot of people who think, *Open it all up* and they're made of Teflon and nothing's going to stick to them and it's all going to be okay. And they're never going to get old and won't need to worry about any of this.

Phil: Right. And when they get old, then people won't care about them, unfortunately.

Christy: Well, if we continue on this same track, I think that's probably true.

Phil: Right. And that's where I think it's just [we] can't stay on the same track, but who knows? Who knows? Vote early, vote often. Vote early, vote often.

Christy: We're all native Chicagoans, right?

Phil: But seriously. You know, without getting political--and we've skated around before--

Christy: Oh, that train left the station 30 minutes ago!

Phil: I know, but we haven't gone there and I don't think we should, but no matter who you support, I think this election is like, either way, it's going to be decided very narrowly, probably. So, if you support one side or the other side, you have to get out and vote.

And you know, my commitment to myself and what I'm trying to hold my family and friends to is find one person who has not voted, will not vote, and get them to the poll. So each of us finds one more person--and I've got my people in mind--and, you

know, just do whatever it takes to get them to that poll or get them to fill out a mail-in ballot if that's what it takes, and send it in. It just, it.... I just....

Christy: Elections have consequences.

Phil: Elections have consequences and this one just feels so important. I mean, you know, I guess we were a little lazy in 2016 because we were coming off of 12, eight years of-- I'm trying so hard not to, you know, be political.

Christy: Oh no, that's okay. I mean, I don't think it's going to come as a great big herkin' shock to anybody to know that you're a Democrat, especially based on your saying, "We were so lazy in 2016."

And you know, the flip side of that is no, the Republicans were not so lazy in 2016. They were motivated and they kept their eye on the prize, right? Whether they personally liked Trump or not, whether they were personally excited about him or not. They understood that if they had a Republican president, they were going to get one, if not two, possibly three Supreme Court seats.

Phil: Right.

Christy: And so they kept their eyes on the prize. I don't remember the exact phrase, but there's some line about Democrats are really, really good at snatching victory from--no, snatching defeat from the jaws of victory, that's it.

Phil: Right. Right.

Christy: I think as long as people want to throw a tantrum about purity politics and *Well, this person isn't the perfect candidate...* I mean, bless their pointed little heads. Show me a perfect person. Show me. I'm dying to know who you have in mind.

Phil: Yep.

Christy: There is no such animal. And anybody--

Phil: Besides me or you, of course.

Christy: Ha ha ha.

Phil: But we're not available.

Christy: We're not, we're not. You know, specific to people who listen to this show, who you're voting for--be it president, senator, representative, state representative, state senator, mayor, city council, board of supervisors, any of those people--any of those people who have the ability to form policy and use tax dollars, what is their stance on long-term care?

What is their stance on public health policy? What is their stance on, let's say, immigration? That seems to be a relevant one when we're talking about the pool of available people in healthcare, available workers.

There is a large portion of the population who believe that something is not a problem unless it personally affects them.

Phil: Right.

Christy: And that is a great way to let a raging inferno swallow us all. As I say to my clients all the time, "Even if you think it's a little problem, let me know. Because I promise you it's going to be easier to fix when it's a little problem rather than you telling me this has been going on for three weeks. Okay, now we've got a pattern. We're going to have to do a little bit more work to figure it out. Which is not to say that it can't be done, but it's going to be more resource intensive. It's going to be more difficult."

So when we look at the future, even if it's five years from now--heck, even if it's two years from now--what do you want the policy to be regarding your loved one and long-term care? How do you want your person to be treated in long-term care? Are you planning on moving your person into long-term care?

If you're not, what's your alternative? What's the other thing you're going to do? How are you going to pull that off? I think a lot of times people think I yammer on about this because I'm just somebody who can't live in the moment--not true--because this is going to impact *your* family.

Phil: Right.

Christy: Maybe not today, maybe not tomorrow, maybe not next week, but it *is* going to impact your family. What do you want that to look like? Pay attention, ask questions of people who seek the privilege of representing you. And if you don't like the answer, look at the other candidates.

Phil: Or look at the policy of the party or--

Christy: Yes.

Phil: The track record of the policy, because a lot of people feel like certain politicians will say anything, but okay, fine, look at what their record is. Look at the history.

That's where I just, I cannot, I cannot understand some people and how they make decisions that they make.

Christy: I think that goes all the way back to Adam and Eve, right?

“Why did you do that?”

“Well, I don't know. The snake made me.”

Phil: Who did Adam and Eve vote for?

Christy: Let's see, they voted for.... They voted for deportation.

Phil: Did they?

Christy: Well with their actions, they did.

Phil: Right, right, right.

Christy: I think we covered a lot of ground. Solved nothing, but hopefully both feel better.

Phil: Okay. You never know. You never know. So good luck on your freezer search. I'm looking forward to my pallet of banana bread. Will one of those big 18-wheeler trucks be pulling up to my house?

Christy: And that's our show. Thank you so very much for listening! Head on over to the show notes at DementiaSherpa.com.