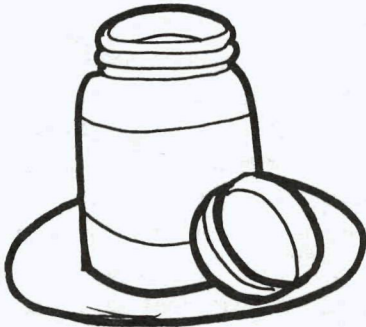


# CJ & ME

By Merrill Mushroom

*In this narrative, the author recounts the circumstances that led to her being the primary caregiver for her grandson. She explains that, while it's challenging to raise an active toddler, the choice to raise him was an easy one to make.*

He's napping! My three-year-old grandson CJ really is napping. He's asleep! Maybe I can do some writing. All week I've craved time to sit down and write, but all week that has not been a possibility. CJ gets up early in the mornings, starts immediately on fast-forward, and stays that way all day long. After he goes to bed for the night, I have other things that *must* be done, and I'm too tired by then, anyhow, to be able to think clearly enough to write.



But there's so much else that I should do while he's asleep. I could wash the floors. I could go outside and stack some firewood. Golly, I could just sit down and catch my breath. I made jelly this morning, with him, and my kitchen is a mess all over, jelly hardening on utensils and surfaces. I should clean up, but I can do that while he's awake and with me, so why waste precious time to clean the kitchen just because I might have to scrape a little harder later to get the jelly off? Hey, I even could take a long shower, alone. But really, I'd rather write, even though last time I sat down to write after he went to sleep, he woke up early as soon as

I'd finally, at long last, gotten rolling along on the manuscript; and he was hungry and couldn't get his own food, so what's a grandma to do but stop her own work and tend to him?

I used to lecture my co-worker Eva as her daughter had one baby after another. Each time, Eva would vow that she was not going to raise *this* one, and each time, the new baby ended up at Eva's home with the others, while her daughter disappeared. "You should *make* her take care of those babies," I'd argue, from the safety of my experience-free position of observation. "Tell her NO. Let them go into foster care if you have to. Maybe that would wake her up. She'll never take responsibility for herself if you keep on bailing her out. You can't take care of all these kids and work your job and run your farm. You're old and arthritic. It'll ruin your health."

My comeuppance arrived when my own daughter informed me at the age of 20 that she was pregnant by her boyfriend who was battering her and that she didn't intend to put his name on the birth certificate.

My daughter has bipolar condition. She's been hospitalized for suicidal depression. She will not take any medication. Hormonal birth controls have caused her to become extremely unstable and spikey in her behavior. Surprisingly, in her pregnancy she became mellow, easy, and almost good-natured. This mood state persisted through the baby's birth and into the six months that she nursed him. Then her mood swings returned, and her usually short fuse shortened even more.

She'd been living at home, having finally



left the batterer permanently. I'd been helping a lot with the baby – he was very alert, active, intense—and he really stretched my daughter's limited patience. She decided it was time to get her life in order, to find a job, to move into her own apartment with the baby. She went through nursing tech training, then got a job in a nursing home. All this was not easy for her, and she needed several starts, but she did it! Of course she couldn't take care of the baby and go to school at the same time, and she couldn't care for him much while working full time. She was working very hard on pulling her life together, so I assumed the major portion of the childcare, even though I had a full-time job of my own teaching preschool. I mean, what's a mom to do but help out her daughter when she needs it?

The situation changed so gradually that I actually was surprised when I realized the baby was living with me while his mother lived elsewhere. I was doing 98% of the child-raising. I was paying for all of the daycare. I was buying the diapers, bottles, clothing, and crib sheets. I was getting two of us ready to leave in the morning, getting two of us ready to end the day in the evening, and getting up through the night to give bottles and comfort. Suddenly, I had become Eva.



I am at a big, important conference. All morning I have been listening to how older people are such valuable resources as volunteers. Now I am attending a workshop on elders caring for others. I think about when women were expected to be the unpaid volunteers of the nation, no matter how poor we were. Now that women are entering the salaried workforce in greater

numbers, apparently old people are supposed to step in and carry this torch.

In my home state, as is true everywhere, grandparents often take on the task of raising grandchildren who otherwise would end up in the foster care system. Some of these children have many problems. In this workshop, I learn that my home state is considering a small pilot program that would provide some financial and health care assistance for relatives who choose to care for these children. The relatives must have legal custody of the children in order to be eligible. The only other way the State will give assistance is if the children are in foster care, i.e., state custody. I think about all the grandmas I know who are raising grandchildren whose parents are not willing to relinquish custody. No matter how poor they are, these grandparents manage to feed, clothe, and shelter, but the costs of doctors, dentists, eyeglasses, and medicines are impossible to meet.

The others in this important workshop are administrators from State Departments and volunteer agencies. I wonder why the State people, who have decided to pay huge amounts of money to private companies for helping place the ever rising numbers of kids in foster care, are so terribly stingy when it comes to giving people money for these same kids within the birth family. I notice that I am the only person in the workshop who is a grandma raising a grandchild.

I am at another workshop at a different conference – this one on brain development. The instructor tells us that the glucose levels in a preschooler's brain is many times the levels in an adult's brain. Later on, at home, this information becomes precious to me as I slump into a chair, immobilized with exhaustion, while CJ continues to run circles around himself as he has been doing all day long. He is a healthy child. During his waking hours of extreme activity, he consumes enormous amounts of food to stoke his furnace. I am forever grateful that he crashes hard when it's time to go to sleep, and that he sleeps all night without even ruffling his covers. I am comforted by the knowledge that both his energy and my exhaustion have been



actually scientifically confirmed as real. At my job, I am a preschool teacher. At home I am raising my grandson. I am sixty years old and live with three-and four-year-old children around the clock. I am tired.

My three-year-old grandson CJ is climbing on my twenty-seven-year-old son who is visiting. He jumps down, climbs up, and jumps down repeatedly, over and over, up and down, non-stop.

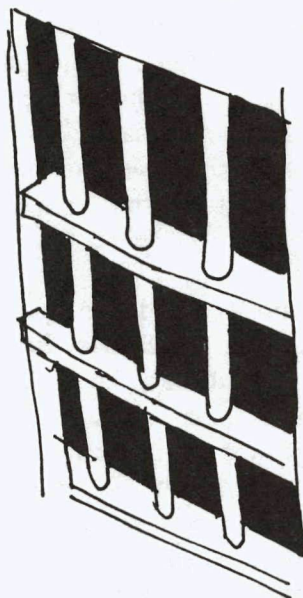
"How come CJ is so hyper?" asks my son. "He's so intense!"

"How come?" I repeat. "Why not, then? I had five, high-intensity children. Why should I have a grandchild who's any lower maintenance? Why should I get any kind of a rest when I did this on purpose?"

That is true. I *had* done it on purpose. Deliberately, I didn't *have* my children, I *got* them, each one of the five from the State foster care/adoption agency; and each one came to live with us given the understanding that this was a child who would require extremely high levels of attention due to mental health needs. Absent from the discussion was the fact that these children would become adults with the same mental/emotional conditions, but they would lose all of the few supports they had as children, such as Medicaid, subsidy contracts, special education. Oh, yes, there was some assistance available for adults with disabilities through vocational rehabilitation programs, but once children reached their majority, it was up to them to take responsibility for their own programming and services. In the cases of my own children, their individual mental health needs prevented them from actually being able to do this. The only case management they'd ever gotten was from me – and what kids want to listen to their mom and do what she suggests, especially when they no longer *have* to? But that's another story...

My daughter is taking good care of her life. She is gaining sense about her condition and realizing how it affects her behavior. She has a good support system and is learning to control her depressions, overspendings, overextendings. She works hard at her job, has a new boyfriend who is not a batterer, has a home with him. She lives and works in

another county, sees her son when she can, feels like a bad mother sometimes, and needs to be encouraged. Sometimes I feel as though I am the mom while she gets to be the grandma, but I am grateful that at least she is able to take care of herself – so many of my friends who are raising their grandchildren have unending grief from their children, have children who are still dependent, who do drugs or are on the streets or in jail.



My daughter would like to bring her son home to live with her, but her fuse is still very short, and spending long periods of time with this three-year-old is difficult for them both. Meanwhile, I make the choice to raise him, as though it could have been a choice at all, as though there ever had been any choice in the matter to begin with.

Copyright of Reflections: Narratives of Professional Helping is the property of Cleveland State University and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.