Juggling Solo Practice and Family Illness, Part 1: Caring for Elderly Parents

By Jeena R. Belil

When I first decided to go solo in 2007, my main reason for doing so was to create a little more balance in my life between my three-year-old daughter and work. I was looking forward to spending more time getting her on the bus in the morning rather than fighting Long Island traffic, and to having family dinners together rather than grabbing take-out food while rushing home to get my baby ready for bedtime.

Never in my wildest dreams did I realize that three years later, and for the foreseeable future, my life would be turned upside down.

When I started my practice, I was 38 years old. My parents had moved to Long Island to be closer to the family. Mom was 65 and Dad was 76. Dad had recently retired and was looking for activities to keep him busy. I needed a little help with grocery shopping and post office runs. Dad willingly took on these tasks so that my workday could have fewer interruptions. Dad also entertained my young daughter, and they forged a close bond, playing with dolls and coloring together. Fast-forward a few years, and my Dad started staying closer to home. He needed to be reminded where the grocery store was and started asking me for directions to places that he once could get to with ease. I knew something was going on with him and I was nervous, but Dad happily went about his tasks. As long as I knew he was okay to drive, I didn't want to constrain his independence. Fast-forward a little later, and Dad started staying inside my house, in a room with a TV, with the lights out, waiting for my Mom to come home from work. When I tried to coax him out of the room and perhaps take a
walk outside, that walk only lasted for about five minutes and then he would show up at the door. Again, this was concerning to me, but my mom would deny anything was wrong, and no doctor was alarmed.

In 2011, my parents moved to Florida. They loved living in their retirement community and made many neighborhood friends. Mom was very upset when she told me that Dad decided that he didn’t want to learn how to navigate the traffic circles and new roads to get around in their new golf cart. I told her that she needed to take him to a doctor, but she resisted. I later learned that this is pretty typical of spouses of dementia patients. I would visit my parents twice a year with my husband and daughter, and they would visit us on Long Island. Soon after moving to Florida, my mom’s calls to me would become more frequent and urgent: Dad was repeating himself all the time, he forgot how to set the table, he forgot how to make coffee, he followed her into every room of the house. He started forgetting his friends’ names. Mom would get visibly upset with my Dad in front of others. Friends started avoiding my parents, and their world started closing in on both of them. While clients were a priority, so was my mom. I needed to give her time to vent and to help her come up with coping mechanisms, as she didn’t yet understand that there were specialized resources available to her.

I urged Mom to take Dad to a geriatric specialist to get him tested for Alzheimer’s Disease. She eventually did, and Dad was started on Namenda, a drug that is supposed to work better the earlier in the disease the patient starts it. Unfortunately, by 2012–2013, when Dad first saw a doctor for his memory issues, he was already in late-early stage, and the drug’s efficacy was going to be iffy.

My visits to Florida started getting longer and more frequent. I set up my office in my parents’ spare bedroom. I ordered a ScanSnap, bought reams of paper, and, because I’m a litigator, I hired qualified per diem court appearance attorneys. Both judges and opposing counsel were accommodating with respect to adjournments when they were needed. I was racking up debt to pay for flights, and my guilt over leaving my husband and little girl each time was crushing.

In early 2014, Mom required extensive surgery and would be in the hospital recovering for a month. At that point, Dad needed constant care. While he was still “Dad,” his short-term memory was completely gone, and he needed assistance with basic activities of daily living. Since the hospital was in St. Petersburg and Dad wanted to be near Mom, plans were made for me to stay in a hotel near the hospital to take care of Dad as my mom dealt with her own serious medical issues. I set up my office in the hotel room and also in the hospital room. Luckily, there was a desk and chair in Mom’s room, so I didn’t have to set up on the floor! Dad was in the hotel room next to mine.
Every night, I would make sure Dad got into his pajamas and into bed. An hour later, there would be knocking at my door. Dad was fully dressed and telling me through the door that it was time to see Mom. Every time I put him back in his room, he’d be at my door minutes later. During the day, we would go right to the hospital after breakfast, and I’d work while Dad napped on the couch in the hospital room. The lack of sleep became too much, and I needed to make new arrangements. We moved Dad into my mom’s room, and I would get to the hospital in the early morning, make sure my dad was showered and dressed, be an ombudsman for my mom, bring my Dad to lunch, remind him to take his medication, come back to do work and take client calls while they both slept, bring my Dad to dinner, and get him into bed. The month took a toll on me physically. I later learned that the incidence of serious health effects of caregiving is a national public health crisis. I completely understood why.

Right before Thanksgiving, 2015, my Dad broke his hip and needed emergency surgery. Mom was helping family living out west with a different health crisis and could not get home. I needed to drop everything and get to Florida as soon as possible. Again, opposing counsel and the courts were understanding regarding adjournments, and I was able to bring my office with me so that things would continue to run as smoothly as possible. While staying in the hospital with my dad 14 hours a day, I was again able to manage juggling work as well as cooking and laundry instructions via FaceTime with my daughter. I don’t recall getting a lot of sleep.

Studies show that trauma has a severe adverse effect on Alzheimer’s patients. Within days of my arrival to my Dad’s bedside, he forgot who I was and, after 50 years of marriage, had trouble remembering my mom’s name. A series of hospital and rehab facility–acquired infections sped up Dad’s dementia even further. He would never come home again. I decided to put some energy into forming a Facebook group for kids with parents suffering from Alzheimer’s and other dementia-related illnesses. I formed a Walk to End Alzheimer’s team, Eli’s Legs, to help raise money for research and to help support other caregivers. I started having conversations with people about how awful the Family and Medical Leave Act (FMLA) really was and how caregivers who don’t have the luxury of a solo practice would be at risk of financial catastrophe from the potential loss of a paycheck.

The last three years of Dad’s life were spent in a nursing home. Not caring about the credit cards, I continued to visit as much as I could, but I was able to plan those visits around most court appearances. Mom would plan family meetings by phone regarding Dad’s declining health, but those were done at night or on weekends. He passed on June 1, 2019, after a brief illness, with his
wife and two daughters caring for him, singing to him, playing his favorite songs, and reading him poetry.

I am very fortunate as a solo attorney—with the benefit of established processes, technology, understanding judges, a supportive husband and daughter, and a fantastic support staff—to have been able to spend as much time as I did caring for my Dad. I have long said that being in the Sandwich Generation is no picnic, but being a solo lawyer did make things just a little easier.

Jeena R. Belil and Her Father, Eli Belil

If your parent is suffering from Alzheimer’s or other dementia-related illness and you are looking for resources or a safe place to vent or just to post about your journey with others who get what you are going through, please feel free to instant message Jeena on Facebook for an invitation to join CHildren of Alzheimer’s Dementia (CHAD).
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