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Y. Stories to Save Lives

Interview Y-0031

Carl Henley

29 June 2018

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ABSTRACT – H. CARL HENLEY

Narrator: H. Carl Henley
Interviewer: Nicholas Allen
Date: 06.29.2018
Location: Carl Henley's home, 3000 Galloway Ridge J208, Pittsboro, NC
Length: Approximately 1 hour and 52 minutes

Carl Henley, a native of North Carolina and career professor in the School of Social Work, lives in retirement community Galloway Ridge. He received a master's and doctorate in biostatistics from the School of Public Health at UNC. The interview began with Carl's recollections of his childhood, from living room radios, old radio shows like *The Shadow* and the *Lone Ranger*, to baseball, and playing football with his brother. Carl talks about a football injury which led to a knee replacement, including an unsatisfactory experience with a doctor who didn't recommend a replacement. He discusses early experiences with Future Farmers of America camp and a childhood experience with Jim Hunt, future governor of North Carolina. He talks about losing his father early and how his mother's response led to some emotional trauma that discouraged him from expressing his feelings later in life. He then explains a confrontation that happened later explaining his mother's side of the story, including information about his father's lifestyle. He talks about seeking resolution with his mother after she had a stroke. He tells the story of his mother's stroke, which he witnessed, as well as the process of taking a hospice patient home to die. He discusses his lifelong struggle with ocular myasthenia gravis. He talks about his proposal(s) to his future wife Martha. He tells the story of her Alzheimer's and her exceptional care at Galloway Ridge, including an exceptional story where Martha momentarily recovered from aphasia to talk with Carl one last time. He discusses venting as a healthy emotional coping mechanism. He discusses Martha's final moments and funeral. He then expounds more upon his education, career, and a near miss with IBM. He tells the story of a stroke he had, including a doctor who did not treat his condition. He talks about the PT/OT recovery process and a few golfing stories. He talks about the difficulty of his current health situation. He discusses teaching hospitals and the frustration of waiting for a doctor's appointment. He discusses his end of life and funerary wishes. He discusses medication side effects that doctors missed.

FIELD NOTES – H. CARL HENLEY

Narrator: H. Carl Henley
 Interviewer: Nicholas Allen
 Date: 06.29.2018
 Location: Carl Henley's home, 3000 Galloway Ridge J208, Pittsboro, NC

NARRATOR Carl is a life-long resident of Chatham and Orange counties. He grew up on a farm in Pittsboro and attended N.C. State University for undergrad and UNC for both his M.S. and PhD in the School of Public Health. He eventually taught in the School of Social Work. Carl has an open and charming nature and a frank way of reflecting on things which lends a depth and import to the interview's more poignant moments. Carl lost his wife rather recently to dementia and his own health is deteriorating due to cancer and bad joints. He uses a motorized scooter to get around due to a serious limp caused by a bad left hip. Despite his physical state, a certain liveliness overcomes his person and eludes an air of aging that might define another person.

THE INTERVIEWER Nicholas Allen is a graduate student in the department of English at UNC-Chapel Hill, currently earning an M.A. in Literature, Medicine, and Culture. His research focuses on late life and end of life.

DESCRIPTION OF THE INTERVIEW The interview took place in Carl's apartment at Galloway Ridge. Carl sat in a big recliner and the recorder was on a table in front of him. Although Carl didn't seem to have a lot to get off of his chest by his own volition, a good bit of childhood dissatisfaction came to the surface as we wound our way through his life. Oftentimes, Carl's laugh seemed to be masking moments of true pain. Although the experience may have been useful for Carl's life review process, the interview took more sad turns than happy and I felt that we ended on a somber note. We talked for just less than two hours.

NOTE ON RECORDING I used the SOHP's Zoom H5 #4 for this recording. We were interrupted by a couple of phone calls, but Carl didn't answer either. Occasionally, Carl would tap the table that the recorder was on with his feet, which disrupted the smoothness of the recording, but I didn't feel comfortable moving the recorder farther away or asking him to stop due to his chronic pain and physical discomfort.

HIGHLIGHTS OR POSSIBLE EXCERPTS Carl's discussion of nutrition and his conceptions of healthy diets, both past and present, may be useful. Additionally, the story of his wife's dying process during dementia is particularly interesting—she mysteriously escaped from dementia-caused aphasia during a crucial moment with Carl long enough to have an incredibly important conversation with him. Additionally, Carl's discussion of

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his parents differs greatly from his sister Rossie Lindsey's and may be a provocative comparison. Finally, his discussion of having to wait long periods of time to see a doctor gesture to systemic problems in the medical system.

TRANSCRIPT: Carl Henley

Interviewee: Carl Henley
Interviewer: Nicholas Allen
Interview Date: June 29, 2018
Location: Carl Henley's home, 3000 Galloway Ridge J208, Pittsboro, NC
Length: 1 hour and 53 minutes

START OF INTERVIEW

Nicholas Allen: Well, in the name of formalities, I'll say that this is Nick Allen interviewing Carl Henley on the 29th of June, the year of our Lord 2018.

[0:00:17.2]

CH: That's right.

[0:00:17.9]

NA: Thanks for sitting down with me, Carl. I really appreciate your time.

[0:00:20.3]

CH: You're welcome.

[0:00:22.2]

NA: And I guess what we like to do is start right at the beginning and have you talk about your childhood a little bit or even about your parents and what they did, what their lives were like, depending on how far you want to go back.

[0:00:32.2]

CH: Well, let's see where would be a good place to begin here. I remember that my dad had one of those great big radios about this wide and about this tall, that sat in the corner, and you had a big chair like this that sat right next to it. I would sit in his lap and we would listen to *The Jack Benny Show*, *Lum and Abner*, *The Lone Ranger*, *The Shadow*, and I remember really enjoying that.

Are you hearing me okay? Can you tell?

[0:01:28.8]

NA: Yeah, I was making sure that the timer was running.

[0:01:31.4]

CH: So my dad was a big baseball fan. He had played baseball himself. So we lived in Kinston and he would invite me to go to the baseball games with him, and I wasn't interested. So, I'd rather stay home and play out in the yards with my friends. But I remember one night, I remember my mother came to the back door and said, "Your dad wants you to go to the baseball game with him."

And I said, "Well, I'm playing with my friends. I think I'll stay home."

Well, in about ten minutes, it got dark and all my friends went home, so I went in the house and said, "I think I'll go with him."

She said, "Nuh-uh. It's too late. He's already gone."

So I missed that opportunity. I didn't go with him many times because I really didn't like watching baseball. I still don't, really. It's pretty much too slow for me. Now, football was a different matter. I remember he bought me a football one time. It was odd-shaped. It was more like a squashed pumpkin or something. I mean it didn't have sharp points on the end. It was about this shape, really, like an ellipse. He would stand in the

front yard and kick that ball over the house, and I would be in the backyard and catch it and run around the house and give it back to him and run back to the backyard and he'd kick it again. So that's probably where I learned to catch a football, and I could pretty much catch it if I could get my hands on it.

One thing I was always disappointed about was that when we moved up here, I was thirteen years old, 1951, and started at school in Pittsboro, and I decided to play football. Well, we had a six-man football team, and my coach wanted a quarterback to back his butt up against the butt of the center. In six-man football, you have to have a clear lateral or a forward pass. In other words, the quarterback can't run it unless he gives it to somebody else first. Well, our coach thought that since the quarterback is now facing the two halfbacks, all he's got to do is take the ball from the center and pitch to one of them without having to turn around. And I was the only person on the team who could take the snap without bobbling it [laughs], and that was probably because I had played on the Little League football team in Kinston and I played quarterback. No, I'm sorry. I didn't play quarterback either. Well, our coach had this crazy scheme where we had a quarterback, but then we had something like a single wing. There were three backs, and I had to play center because I was the only one who could snap it between the quarterback's legs to one of the other backs without hitting the quarterback's legs. So I got that experience doing that.

So then in high school, as I say, I had to play quarterback because nobody else could take the snap without bobbling it, and I couldn't throw the ball very far. Forty yards is about as far as I could throw it. But I was always disappointed that I didn't get to play on the same team as my brother, because he's exactly four grades behind me, so when I

was a senior, he was in the eighth grade. When he got to high school, I had already graduated. I was a freshman at [North Carolina] State [University]. But he could throw the ball a mile and I could catch it, so I thought we'd make a great team. We did play in a lot of pickup games, but never on the same official team.

[0:05:55.7]

NA: Did y'all ever have any football-related injuries while you were playing?

[0:06:02.4]

CH: Yeah. I was playing defensive back one time and this big guy comes running with the ball, and so I dived at his legs and tackled him, but he was so much bigger than I was that he bowled me over like this and tore the cartilage in my right knee. And that was a problem for years.

[0:06:26.3]

NA: Does it still give you trouble?

[0:06:30.0]

CH: I had it replaced, finally. I went to see this one guy at UNC. His name is Lachiewicz. He's an orthopedist. My knee hurt like hell. Nick, I'm telling you. And so he said, "Well, can you stand on that leg?"

And I said, "Yeah."

"Well, let me see you do it." So I stood on it. It hurt. He said, "Can you jump on it?"

I said, "Yeah, but it'll hurt."

He said, “Well, let me see you jump three times.” So I jumped three times. Now, this was after I was a faculty member. And he closes up my folder and says, “Well, Dr. Henley, you don’t need a new knee.”

I said, “How can you tell?”

He said, “You didn’t fall down.” [laughs]

God. I thought, “Damn. Is that your criterion for deciding whether somebody needs a new knee?”

So I suffered with it for another ten years, and then finally I went to see somebody else and he said, “Oh, my word.” By that time, my knee was bent at least 30 degrees, maybe more, and I got it replaced and I was so happy once I did, because it really didn’t give me any trouble after that.

[0:07:50.4]

NA: Oh, wow. It went real good, huh?

[0:07:52.3]

CH: Yeah. So, well, let’s see now. I’ll tell you one funny story. At Pittsboro High School, we had a Future Farmers of America chapter, and since I was living on a farm, I thought I ought to know something about farming. So I had taken agriculture, agriculture and shop, they called it. I was not worth a nickel in shop. I mean, I couldn’t do anything like that. [laughs] But we went to an FAA camp every summer, and one year, we went to White Lake. They had a beautiful camp down there.

So our team won the volleyball championship. Well, maybe Rossie told you, but Jim Hunt, governor for sixteen years here, is one of my first cousins, and he was always politicking. Well, after we won the championship, we were walking around with our

chests puffed out, and he got me aside and he said, “People are talking about how y’all are bragging about this.”

And I said, “Well, we’re good.”

He said, “Well, okay. But, you know—.”

I said, “As a matter of fact, those guys that we beat in the championship game, we could play them with three players and still win.” Then I thought, “What the hell are you talking about, Henley? Why don’t you keep your mouth shut?”

But my brother, who was actually not old enough to go, he was in the eighth grade, but he was already tall, and a guy named Terry Bullington and I played them and we beat them. [laughs] Shit. I don’t know. Yeah, well, we were proud, so why not, “If they think they can beat us, let’s see if they can.” [laughter]

Okay. So when I was nine, as I said, my father died, and something really bad happened in addition to that. I told our mother, I said, “I am really mad at God for taking my daddy away from me.”

And she flipped out. She was from one of those Methodist families that “God’s will be done,” and so she literally said to me—I can still see her shaking her finger in my face, and she says, “Don’t you ever let me hear you say that again. God’s will be done.”

And I thought, “That’s the craziest thing I ever heard in my life.” But it really put some shame on me. I had to work on that. I joined a therapy group one time, because what it did to me was encouraged me not to express my feelings, and that’s not good.

[telephone interruption]

[0:12:11.5]

CH: Okay. So, yeah, it taught me not to express my feelings, and that was tough. I had to work on that a long time, and I still don't do it real well. I mean, I'll do a lot of things rather than have a face-to-face argument with somebody. I don't like to do it.

[0:12:35.7]

NA: What do you think it takes for somebody to get through that loss and get to a place where they can talk about their feelings a little bit? Like, what is that process like?

[0:12:47.9]

CH: Well, I think you have to talk about it, which is why I joined that therapy group.

And then I invited my mother to go to a play in Charlotte that I—in addition to teaching in Chapel Hill, I was their “Mr. Inside, Mr. Outside.” [laughs] We had something called an off-campus program where students could go to school one day a week, take two courses, generally on Friday, and their agency let them work ten hours, four days a week, to be full-time. So while we were driving to Charlotte, I reminded her of what she said. She said, “I don't remember saying that.”

Well, I didn't quite know where to go from there, but I thought about it a little while and then I said, “Well, you did say it, so why do you *think* you said it?”

So she says, “Well, my husband had died. I was left with three young kids. I didn't have a job. I didn't know what I was going to do.” She never said, “And I grew up in a family where they don't express feelings,” but she did.

So then I kept on it. I said, “Well, what do you *wish* you had said?”

Well, she thought about that for a while, and she said, “Well, your daddy didn't take care of himself. He was overweight. He ate way too much. He wanted eggs and

bacon and sausage every morning. Now, in 1947, we didn't know anything about cholesterol, but, I mean, he got a gob of it every morning. Had he known about it, maybe he wouldn't have done it. I don't know." So she said, "I was really scared."

And I said, "Well, that makes sense to me. I mean, I would have been scared, too, I'm sure."

I was scared, because in addition to saying that, she said, "Well, you're now the man in the house, so you have to look after your brother and sister." Wow. Nine years old and I'm the man of the house, yeah. I guess because she viewed me as the man in the house, when things didn't go right, it was my fault, because I was supposed to be looking after everybody. So I got blamed for a lot of stuff, and that probably encouraged me to do some of it, because as long as I was going to get blamed, I may as well get credit for doing it. [laughs] I don't know. But, nonetheless, I got blamed for *a lot* of stuff. Whoo! [0:16:10.3]

NA: That's a hard way to go coming up, huh? [0:16:14.4]

CH: Yeah, it was. I never did anything illegal, but our mother thought that I was—she used to say, "You're gonna be in the penitentiary by the time you're twenty-one." Well, I didn't quite make it there, but she thought I was going to. And she would say things like, "Your tongue is about a mile too long. Somebody ought to cut about half of it off." Yeah. Yeah. [laughs] God. Which, of course, made me even more likely to say something sassy.

Anyway, I remember when she died—I'll tell you about that in a minute, but I remember when she died, and they had her at UNC Hospital and we were having trouble

getting her home, because she always wanted to die at home. It's a hell of a job to get somebody out of the hospital to let them die at home. They don't want to let them go. But anyway, I went over to her room one day, I think maybe in between classes or something, and I sat there and had a conversation with her. I mean, it was one way, because she had had a stroke. She was totally brain-dead. But I told her all the things that she had done that I didn't like and I was blamed incorrectly, so I felt better about that. She didn't respond, but I got to tell her, anyway. Well, I have to admit that I didn't feel a great amount of sorrow when she died. There were too many things that she had blamed me for that I was not responsible for.

So, anyway, when she died, it was weird. Martha had gone to Greenville to visit her parents. This was a Friday night. I had not gone with her. I can't remember why. But we had two dogs, and so I had gone over to Mother's house. We lived like 150 yards apart. Martha and I built a house out in the front cow pasture. I had talked to her. And then I said, "Now—." I was leaving. She was in the kitchen and I had walked almost into the hall, and then I turned to say—is that thing doing all right?

[0:19:23.4]

NA: Mm-hmm.

[0:19:24.3]

CH: Then I turned to say, "Now, don't forget to feed our dogs." And she was standing there like [demonstrates]. She was blowing air out of her mouth. I looked at her, and she had this blank stare, so I waved my hand in front of her face. She didn't blink or anything, so I knew that she was having a stroke or something. But she didn't fall down. I mean, it was amazing. So I took her and turned her and helped her walk to the couch, and

she stumbled over there. And I helped her get on the couch, propped her head up. I mean, she was already gone. Her eyes were focused on one thing. She kept [demonstrates] blowing air out of her mouth.

So I called Rossie, first of all, and she said, “Well, call the rescue squad.”

I said, “I am, but I wanted to call you first.”

So they came and got her and took her to UNC, and after we had spread the word around the family that she had had a stroke, we decided, well, we want to get her and bring her home. [laughs] Well, you have to have everybody and his brother sign a damn statement. We even had to get her remaining sibling, James, who lived in Wilson, to come up here and sign a release form. I’m shitting you not. I mean, isn’t that crazy? God. You can’t walk in and say, “Okay. We’re taking her home.” No. [laughs] Now, whether they were legally allowed to do that, I don’t know, but that’s what happened, anyway.

So we finally got her home. I had called Martha and told her what had happened, and so she came home. Mother had always said she wanted to die at home. Martha said, “Well, it’ll take her somewhere around seven or eight days to die,” because we took everything away, no nutrients, no water, no nothing. We got hospice to come, and they put a little morphine on her tongue, but other than that, she didn’t get anything. And it took her eight days. She died on April Fools’ Day. She was big on playing April Fools’ jokes. So I said, “Wouldn’t it be something if, all of a sudden—?” She was on this bed in the dining room. There’s a fireplace there. But this was April, of course, so we didn’t really need a fire, I don’t think. So I said, “Wouldn’t it be like her to, all of a sudden, sit up and say, ‘Ah, you thought I was dead. April Fool!’” [laughs]

I remember one year, she served us each a glass of vinegar. She started serving us apple juice a couple days before, but on April 1, she switched it to vinegar. [laughs] So she did have a sense of humor.

[0:22:56.6]

NA: That's a pretty good one. I'm going to have to steal that.

[0:23:03.0]

CH: Yeah, I know. Okay. So, let's see. I graduated from Pittsboro High School and then I went to N.C. State. On the entrance exam, on the English exam, I had 100 percent comprehension and I was in the bottom 5 percent in reading rate. Well, I have what's called ocular myasthenia gravis, which it's an autoimmune disease and it causes you to have double-vision, so you can't read fast at all. I never knew in high school why I couldn't read stuff, and then you get a damn history book that's three inches thick. How are you going to read that? You can't do it. So that was tough.

But I didn't know why, so I took two speed-reading courses. It didn't really help any. I mean, you can't override this stuff. It's a big mess. I got some glasses, but they're not working out so well. I mean, I wore glasses for a long time, regular glasses, but, see, they forced it up, this lens, so that I don't have double-vision, and this is my distance eye. I think what I'm going to do is get one of those black patches or black cups or something that goes over this eye, because the light comes through here and it messes with my vision. I don't like it at all, so I've got to work on that and figure out what to do.

[0:25:08.7]

NA: When did that get diagnosed?

[0:25:10.7]

CH: About five or six years ago.

[0:25:10.7]

NA: Oh, wow.

[0:25:13.9]

CH: Yeah, so I went a *long* time without it. Actually, my freshman year, we were planning a trip to California, and we were going to drive. We were going to go down the southern route and come back the northern route. Well, we did. We stayed gone six weeks and four days. We spent two or three nights in a motel, one of them being the first night, because we were going to camp out in South Carolina, but we set up the tent, there were mosquitoes everywhere, so we said, “No, nuh-uh. We can’t deal with this.” So we went to a motel. We stayed with friends or relatives. I mean, if there was somebody en route to the next stopping point, we arranged with them that we would come spend the night with them and visit. So we did, and it was a good trip, really. When we got to the Grand Canyon—did Rossie tell you about—

[0:26:14.3]

NA: Nuh-uh.

[0:26:14.8]

CH: Okay. Well, she and Tommy and I walked down the Bright Angel Trail, which is 7.8 miles down to the Colorado River and about 100 miles back out. [laughs] I mean, it’s—God. So it took us three hours and fifteen minutes to get down there. Well, Rossie has this condition where if she gets—she used to faint when she would be cheerleading. She would jump up, and, evidently, her blood pressure would drop or something and she’d fall in a heap. So on the way back out—it wasn’t very far back out

from the river—we stopped at this little place called Indian Wells where there's water. Well, she fainted, probably from the heat that time, because it was 120 down there at the river. And then two guys were coming down, and one of them fell in love with Rossie immediately, so he and Tommy and I, he turned around and said, "I'm going to go back out with y'all." So the three of us had to carry Rossie piggyback. That's a hell of a trip back out, man, I'm telling you. That's why I say it was 100 miles back out. God.

So finally, it started getting dark, and we had left the rim that morning at 9:15. We got down to the river at 12:15. I don't remember exactly what time we started back out, but let's say 1:00 o'clock, 1:00 p.m. Then she faints. So it started getting dark, and so Tommy and this other guy say, "Well, Carl, why don't you go ahead and tell Mother what's happened here and we're coming. But she's going to be freaking out. She'll probably be sending the cavalry after us." So that's what I did, and they didn't get out till a little after midnight.

Okay. So then the rest of that trip, I mean, we continued the same thing. We would stay with friends or relatives if there was somebody en route. Most of the time, we would camp out. As I say, I think we only spent two nights in a motel. The favorite place to camp was in a graveyard, because oftentimes you have a little mound to put your head on like a pillow. [laughs] And they usually keep the graveyards mowed pretty well.

One morning, I remember I heard something [demonstrates], and I woke up and opened my eyes and here comes this cowboy driving his cows out to pasture. He's on his horse, and the cows have got bells on them, [demonstrates]. So I raised my head up and looked at him, and he tips his hat to me and keeps going. [laughs] I waved goodbye, went back to sleep.

[0:29:52.1]

NA: Oh, man.

[0:29:58.0]

CH: I know. I know.

[0:30:00.6]

NA: How old were you when you met Martha?

[0:30:02.2]

CH: Well, let's see. We got married in 1981, and that was probably five years after I met her. So, seventy-six, so thirty-eight to seventy-eight would be forty years. I was late thirties, somewhere along in there. She'd never been married. I must have asked her to marry me a dozen times, and finally I said, "Okay. This is it. I'm going to ask you one more time, and if you say what you typically say, which is, 'Well, I'd like to—.'" I said, "Like to? It's a yes-or-no answer. Will you marry me? Now, 'yes,' and we'll get married. 'No,' and I'm outta here."

"Well, I'd like to." [laughs]

I said, "No, that's not good enough. I'm gone."

So the next thing I know, I get a valentine that says, "Roses are red, violets are blue, if you'll marry me, I'll marry you."

I said, "Well, okay." [laughs]

So we did. I did and we did, yeah. We lived in a little house on Valley Park Drive in Chapel Hill. You know where that is?

[0:31:26.6]

NA: Nuh-uh.

[0:31:26.6]

CH: It's up behind—you know where Camelot Village is?

[0:31:28.9]

NA: Mm-hmm.

[0:31:30.9]

CH: Well, if you go straight through Camelot, it becomes Valley Park Drive, and we lived a few houses up on the right. It was a little small house, 1,010 square feet. Not very big. Not as big as this apartment. We lived there. Then in 1987, my mother said, "Well, if y'all will move out here, I'll give you a lot."

And I said, "Well, this house is mighty small. Okay."

So we built our house in 1987 and moved there and lived there for twenty-five years until we moved here. The reason we moved here was because Martha's sister and Rossie both said to me, "Carl, you need to find someplace to move to, because we can already tell that Martha is beginning to show signs of Alzheimer's." See, their mother and their mother's sister died with Alzheimer's, and it was beginning to show in Martha. I mean, it was very subtle.

But I am so thankful they said that, because then we got busy looking around, and I'm really thankful we chose here, not the least of which is my bossy sister who looks after me. But I can pretty much tolerate the bossiness. The phone's not on, is it, so she can hear me? [laughter] God knows. No, it does get to be a little bit of a problem, because, I mean, she has the nickname "Bossy Rossie." I mean, she is bossy. No question about it. I can pretty much tolerate it, but occasionally I have to watch my tongue, because I have this theory that if something bothers you, if you go ahead and get it out,

like a little Old Faithful geyser, goes off every fifty minutes or whatever, if you keep it shoved down in there, when it comes out, man, it's not pretty. So I've worked on go ahead and get it out in the open. But I've had to shove it down with her, so occasionally it wants to spout out. [laughs] You know what I'm saying.

[0:34:17.4]

NA: Rossie and I were actually talking about that at lunch, not about you, but about, in general, how it can be harmful to keep those things in. Sometimes you need a little space to vent and get it out.

[0:34:25.8]

CH: That's right. That's right. I know it. I'm glad to know that she feels the same way I do.

[0:34:32.6]

NA: So what was it like as the dementia was setting in with Martha? I guess the care here is really good.

[0:34:41.8]

CH: Yeah.

[0:34:43.6]

NA: Is there a memory unit here?

[0:34:45.1]

CH: Yeah, there is. Well, I should have realized what was going on, but when you're with it every day, it doesn't compute as easily as it seems like it would. But she would sit over there on that couch at midnight—now, she didn't normally stay up that late. We couldn't sleep together because I had a stroke in my spine in 1995 and it left me

with nerve problems, so I'd jerk at night. I don't realize it, but it would wake her up. And she snored. She claimed she didn't, but she did. So we couldn't sleep together, so I slept in there and she slept in here. Well, at midnight—I remember this very distinctly—one night, I came out, she was sitting there flossing her teeth and I said, "Honey, it's midnight. Don't you think it's time to go to bed?"

"I'm flossing my teeth!"

"Okay. Well, when you finish, maybe it'd be a good idea to go to bed."

"I'm flossing my teeth!"

I thought, where in the hell is this coming from? But I didn't put two and two together.

So a couple more things happened like that. Then she did a couple things that the administration here couldn't allow to happen, like this woman was coming from Chapel Hill who works here, and she met Martha walking up the highway in the middle of winter with just a light sweater on. So the woman did a U-turn and came back and pulled up beside her and said, "Martha, where you going?"

"Well, I'm going to CVS to pick up my prescriptions."

"Well, why don't you jump in and I'll take you up there?"

"Well, okay." So she jumped in and they went up there and Martha got her prescriptions. I mean, she knew enough to have her Mastercard with her.

So the woman brought her back and, of course, told the administration about it.

Well, then the next thing we know, Martha has a pair of Bermuda shorts that the button had popped off. Well, now, as many degrees as she had—you know how many she had? [laughs] She had a bachelor of science in nursing from Duke. She had a family

nurse practitioner's degree from Carolina. She had a geriatric nurse practitioner degree. She was the first geriatric nurse practitioner in the state of North Carolina. She had a master's in divinity from Yale and a doctorate in ministry from Southeastern Theological Seminary at Yale. If you had money to give her, she'd go to school tomorrow. Yeah. "Come on down here, honey. You can go back to school." She *loved* to go to school.

Well, she didn't know how to sew on a button. [laughs] So she takes off down the hall to Rossie's apartment. She had on a bra and a blouse and her panties. That was it. She rounds the corner and gets down there almost to Rossie's apartment and she meets this woman who's like the director of admissions or something, and she said, "Oh, Martha. Come here quickly." So I don't know whether they knocked on Rossie's door or Rossie already knew she was coming. I'm not sure which. But, anyway, they both hustled her into Rossie's apartment before anybody else saw. Well, that was pretty much the straw that broke the camel's back.

So we had a meeting, and they had decided that—well, the CEO told Martha, "Martha, when you moved here, we promised to protect you, and we can't have you out walking up the highway because it's too dangerous, and if something were to happen to you, we'd be responsible. So we think it's time for you to go to the memory unit." Well, no, she didn't think it was.

So I chimed in and I told her that her psychiatrist and her primary care person both thought it was time to go. I don't remember whether they did or not, but that's what I said. [laughs] So she was crying, "Did they both say I need to go?"

I said, "Yeah, they did, honey. But it's going to be fine, because I can come see you every day. I'll come eat with you."

“Okay.”

So she went. They don't want you to go see them for two weeks. The first two weeks, she must have called me probably twenty times every day, every day. “Get me out of here. I don't need to be here. Get me out of here.” Most of the time, I wouldn't answer the phone because I'd recognize the phone number. But after the two weeks were over and I went to see her, she was happy as a lark. She never once asked me to get her out of there. It was amazing to me. Certainly Rossie and I wouldn't have expected that, because, I mean, she wasn't the type to be confined in some space.

But she made the statement one day that she was the best employee they have and they didn't even have to pay her. [laughs] It was a problem at first because she went around telling everybody how to do their job. Well, she did know how, because she had written a book on it, but it didn't sit well with them. [laughter] Shit. “I'm the best employee they have, and they don't even have to pay me.” God.

Well, she was there for about two years, and I went and ate with her five nights a week. They loved for me to come because that meant they didn't have to sit with her, because she had trouble swallowing and she would get choked, and so somebody needed to monitor how she ate. She would forget that she'd already put two bites in her mouth and she'd put another one in there. So it was difficult. I mean, she was also incontinent. That didn't bother me. Hell, I grew up on a farm. If you grew up on a farm, nothing like that bothers you at all. Plus, I had to milk our cow twice a day. That got me used to a lot of things.

So she had a stroke two years ago and it paralyzed her left side. She got some of that back, but she really had trouble swallowing after that. And then on December 6th of

2017, she had another stroke. We took her to the ER, and I guess this guy was probably a resident and he said, “Well, it’s a mild stroke. She’ll be fine.” Well, it wasn’t a mild stroke. Either it kept going or something happened, because she kept getting worse. Finally, she got so she couldn’t talk. She mumbled [demonstrates]. Caroline, my daughter, could read her lips to some extent. I generally couldn’t do that.

About a week—well, somewhere right around New Year’s, Caroline and I met with hospice and we got her into the new hospice unit down here, between here and Pittsboro. She died five days later, which was a blessing. I can’t remember the date of this, but sometime like a week and a half before she died, she was still at Galloway. I was sitting next to her in her room. I had my hand on hers. We were both crying. And, all of a sudden—

[interruption]

[0:44:57.2]

CH: Okay. So, now, remember, she can’t talk. She mumbles. Well, all of a sudden, she says—and her speech was as clear as it’s ever been—she says, “Do you know that I’m dying?” I gulped. Here’s a woman that hadn’t been able to talk for two weeks, and, all of a sudden, she says, “Do you know that I’m dying?”

Well, I don’t know what you would have said, but I started to say, “No. How do you know?” But I did sort of know, so I said, “Yes, I do, honey, and I know you’re miserable.”

And she said, “I am so tired of living like this.”

So, once again, I tried to think, “What am I going to say now?” I said, “Well, as part of your job, you helped a lot of people have a good death, and that’s what you want Caroline and me to do for you, right?”

She said, “Absolutely.”

I said, “Well, we’re going to try to get you in hospice.” And then I said, “Well, it’s okay.” Now, I don’t know what I was going to say next, but sometimes you say something like that.

And she says, “It’s not okay!” [laughs]

I said, “God. No, you’re right. It’s not. I don’t want you to die. I don’t want you to be in this kind of shape, and I know you don’t.”

So we both cried some more, and she might have said something else in between. But then—let’s see. Let me think what I said next. Shit. Oh. Well, we both got quiet for a minute, and then I started crying again. So she says, in this tone of voice, “Well, why you crying now?” [laughs] Like, “You’ve already done that. I mean, what’s the deal here?”

I said, “Because I’m thinking about how much I’m going to miss you.”

And she says, “I’m going to miss you, too, honey.”

That was the last word I ever heard her say that I could understand. She went right back to mumbling. Shoo! I’ll tell you, that was an experience. Yeah.

[0:48:14.3]

NA: That’s a really heavy thing, Carl.

[0:48:17.5]

CH: It was.

[0:48:18.6]

NA: What do you make of it?

[0:48:20.0]

CH: I think it must have come from up there. I don't know where else it would have come from. I think probably God gave her the strength and the ability to say, "I want to get out of this world as fast as I can." Yeah, that's what I think.

[0:48:44.6]

NA: How was her hospice experience?

[0:48:47.1]

CH: She was almost totally out of it by the time we got her down there. I mean, she could make eye contact and she could still mumble some. I couldn't understand a word she said. Caroline could for part of it, anyway. But then in a day or two, she got to the point that she couldn't even mumble. She could move her eyes. We would talk to her, but I couldn't make any sense out of what she was saying. I think we got her there on a Sunday, and she died 4:15 Thursday a.m., and the reason I know that is because I told Caroline, who had spent two nights there in a room with her—there was a nice little sofa bed. So I was on the sofa bed, and then, all of a sudden—I mean, I don't think I'd recommend somebody be in the room with somebody who's dying, because their breathing pattern is so irregular that every time it changes, you want to jump up and see if they're still breathing. I didn't like it, but I was there.

At 4:00 o'clock or maybe a little after, my cell phone dings, and I knew somebody had sent me a text. Well, Jimmy Hunt's brother Robert claims he can't sleep in his bed more than four hours or so, so he gets up, goes out, sits on his recliner and either goes back to sleep or starts sending out emails, jokes, whatever. So he was responding to

an email that I had sent him asking him about his wife's heart. So that was the ding I heard that woke me up. So I replied to him a time or two, and about that time, I decided, okay, I'm going back to bed here. And at that moment, I realized that her breathing pattern had changed, and I quickly went over there and she wasn't breathing. So I put my ear down next to her mouth, and she's lying there with her mouth open and her eyes open, but nobody's home.

So I called the nurse, and she came in and checked her out. She said, "Yeah, she's gone." So Caroline wanted me to call her as soon as I knew. I wasn't going to call her at 4:15 a.m.

This woman named Carolyn Ashford Works [phonetic], she and Martha had worked together for a good while, and I had actually ended up hiring Carolyn to be Martha's companion while Martha was over in the memory unit, because when you hire a companion from here, I mean, at the risk of sounding ugly, at least three-quarters of the aides that you hire are way overweight. Martha used to love to walk. She'd try to get those women to go walking with her, but they would want to—they would go over to the gym. There's a big track upstairs. They would sit on their chair guarding the exit mess with their cell phone. One of them was walking with Martha one time, and that woman told Martha, "Martha, you need to slow down. I can't keep up with you."

And Martha said, "Well, you need to, because you're way overweight." [laughs] My God. Shit. You don't know what's going to come out of the mouth of an Alzheimer's patient. "You need to, because you're way overweight." [laughs] I imagine that didn't go over too well, don't you imagine? Oh, God.

Well, anyway, so we arranged—that was on January 5th. She had had the stroke on December 6th and she died on January 5th, and we had a memorial service on February 4th. People said, “Well, why are you waiting so long?” Well, we’re waiting that long because somebody’s got to write the obituary, first of all. Somebody’s got to create the order of service. I mean, you don’t just have it tomorrow. And, by the way, she was my wife, so I’ll have it when I want to. [laughs]

We arranged to have her childhood buddy, Donna Whitley [phonetic]—they met when they were twelve years old, and they were bosom pals from then on. She came, and the title of her talk was “Childhood Friends.” And then her oldest niece spoke on family ties or something like that. Then, finally, Carolyn Ashford Works spoke on work experience together or something. I don’t know. Adult friendship. Maybe that was it. But I’ll tell you, a *lot* of people told me that was the most meaningful service they’d ever been to, so it came out pretty well.

[0:55:15.9]

NA: Worth the wait, huh?

[0:55:18.3]

CH: Yeah. I don’t know. Do you want to see a copy of her obituary?

[0:55:27.3]

NA: Yeah, I wouldn’t mind.

[0:55:30.6]

CH: I could send you one by email, actually.

[0:55:32.9]

NA: That’d be fine. Yeah, I’d like to see it.

[0:55:35.3]

CH: Okay. Just remind me to do that before we—

[0:55:38.6]

NA: And we'll remember to look at your cell phone. I've been thinking about it.

[0:55:41.3]

CH: That went right through that moment, yeah. Great minds, as they say. Yeah.

So how are we doing here? It's 3:10. You want me to tell you anything about my teaching experience?

[0:55:52.7]

NA: Yeah, I'd love to hear about it, as much as you want to tell.

[0:55:55.7]

CH: Well, I had not actually completed my Ph.D., because I found it *extremely* difficult to work full-time and still work on a dissertation. I mean, it is just—shoo! And what helped me out there was—well, I guess I should tell you how I got to the School of Social Work. I had taken the LSAT, the Law School Admissions Test, because I didn't know what I was going to do. I quit biostatics because it was way too theoretical and I went to see the chair of the department, Bernie Greenberg, who later became the dean of the School of Public Health. But I said, "Dr. Greenberg, I can't do it." I said, "I'm not interested in theoretical stuff."

"Well, what are you going to do, Carl?"

I said, "I don't know, but not this."

So I took the Law School Admissions Test, got myself admitted to Carolina, but they didn't want to give me any money, and I had a brand-new son. I went and

interviewed with IBM. "Oh, yeah. We want you to work for us, Mr. Henley. We'll call you tomorrow afternoon by 2:00 o'clock and tell you everything you need to know."

Well, 2:00 o'clock came and went and they hadn't called. 3:00 o'clock came. They hadn't called.

Bernie Greenberg calls me. "Carl, this is Dr. Greenberg."

"Yes, sir."

"Well," he said, "I've been talking to your professors, and every one of them says that you would make an excellent applied statistician. So we've looked through our curriculum and we've picked out courses. And so we've got one Public Health Service traineeship left. We'll give that to you if you'll come back. It'll take you two years to finish."

And I thought, well, shit, I don't have a job. I don't have any money. I've got a new son. IBM hadn't called. I said, "Okay. I'll do it."

Well, as you would know, IBM calls five minutes later or whatever, and, "We want you to be a systems engineer."

I said, "I can't do it."

"Why is that?"

"You told me you were going to call me by 2:00 o'clock. At 3:00 o'clock, my former chair called me and offered me a different curriculum, which I think I would really like, and you guys hadn't called me, so I couldn't afford to say no."

"Oh, well, you can call him back and tell him no."

I said, "No, I can't. Nuh-uh."

So, I probably would have been rich if I had gone with IBM, but I didn't, and I haven't ever regretted it, really.

I finished everything except my dissertation, and, all of a sudden, this guy from the School of Social Work whom I had met in a course in biostat, or School of Public Health, anyway, said, "I need somebody to come over here and help me teach statistics for one semester."

Well, my traineeship was expiring. I didn't have any money. Shit. So, once again, I said, "Okay. I'll come." So I did. That was in the fall of [19]68. I walked out in the summer of [19]99 after 31 years. Working for that guy—I mean, he said working for him. He viewed me as his graduate assistant or something. The interesting thing was that the students really liked me, but they hated him because he was an asshole. He treated me the same way he treated them, and I tolerated it for two years. I don't know why, but I did. When you're in a bind for money, you do a lot of crazy things and that was one of them.

So I finally went to see the dean—his name was C. Wilson Anderson [phonetic], but everybody called him Andy—and I said, "Andy, you can shoot me, you can fire me, you can hang me, you can do whatever you want to do, but I cannot spend another day in a classroom with Al Johnson."

Well, he leaned back in his chair, and it seemed to me that all the blood drained out of his face. I thought, "God, he's going to have a heart attack. It's going to be my fault." [laughs] Then he leans up on his elbows and he says, "Carl, what in the hell took you so long? Everybody knows that Al Johnson is crazy as a damn loon." [laughter]

I said, "God, that's a relief to hear that."

So he gave me my own classes, and I got voted Teacher of the Year the very first semester I taught by myself.

[1:01:50.0]

NA: Wow.

[1:01:51.9]

CH: I know. That guy raised hell, Johnson. He even wrote a letter to the provost trying to get me fired. Yeah. I don't know if I want you to put this on the record or not, but I'll tell you anyway. He told me that he was going to get me fired. So, somehow or other—oh, I know. His secretary and I were pretty good friends, and she told me one day, she said, "Dr. Johnson wrote a letter to the provost about you, because I typed it." She said, "It's in the outgoing mail slot."

So I got up at 2:00 a.m. [laughs]—God, I can't believe I did this—and I went over to the school and I got the letter, and I realized that it was in an envelope that I could substitute another one for. So I opened the damn thing, made a copy of it, put the letter back in another envelope, stuck it back in the slot, and got the hell out of there as fast as I could. Essentially what he said was that I was insubordinate, that he had hired me, and a lot of other crap. So I was happy that I did it, and the provost apparently said [demonstrates]. Nobody ever said anything to me about it, so I'm sure that pissed Johnson off too. "But everybody knows he's crazy as a loon." [laughter]

Okay. So in the fall, I had taken a course called epidemiology, and it's really a research methods course, is what it is. So I modeled my research methodology course after it, and I taught all the first-year master's students in the fall and then I had them all again in the spring in a statistics class, so I knew everybody's name, and I had the

reputation of knowing their names within the first two weeks. They said, “You damn well better study before you go to Henley’s class, because he’ll call on you by name.” So I did. [laughs]

What I did, I got a legal pad, and this room I liked to teach in was like this with tables around here, so I passed it around. I said, “I want you to write your name as though what you want to be called. ‘Nick.’ Okay?” So they would pass it around, and I said, “Now, I want you to sit in the same seat for the first two weeks. You can sit anywhere you want to after that.” Well, of course, after two weeks, nobody wants to move. But I would have that thing on my desk, and I could look, “Oh, Nick Allen, he sits right over there. That’s right.” So it was not hard for me to learn their names, and it was also very important, because if students know that you know who they are, I’ve found that they’re more likely to have done their homework and preparation for the class.

So I don’t know how many times I won Teacher of the Year, but it was at least four, because at my retirement party, the dean said, “Carl is the only person I know who was voted Teacher of the Year at each of four decades.” Well, I got there in the fall of [19]68, so I had one more year in the sixties, and then seventies, eighties, and I didn’t retire till the summer of [19]99. So that was good. And the fact that I had them all first semester and spring semester, I pretty well knew who they were by the end of that time. I had a real good experience teaching, I thought. I was glad that I’d not gone to work for IBM. I was glad I didn’t go to law school. I would have never made it through law school, because I didn’t know why I couldn’t read.

[1:06:48.8]

NA: Do you think that reading affected your teaching at all?

[1:06:53.0]

CH: Maybe a little. The research methodology book was more difficult than the statistics, because, in math you've got formulas and a little discussion of it. But, I'm sure it did to some extent.

Let's see if there's anything else. Well, I had the stroke in July of 1995, and I was playing golf. We had gone to Southern Pines to play golf. Our regular foursome, we were missing one guy because he had to go to some a meeting. But on the way down there, I was in the backseat behind the passenger seat, and I said, "No, I'm having some kind of a muscle spasm here in my left shoulder."

[1:08:09.5]

[telephone interruption]

[1:08:13.5]

CH: That was a robocall.

[interruption]

[1:08:48.7]

CH: So where was I before the phone rang?

[1:08:54.6]

NA: You were behind the passenger's seat feeling a muscle spasm.

[1:08:57.6]

CH: Yeah, yeah. And it began to really hurt. I remember it was a beautiful day, but the sky started getting grayish.

Are you running out of tape or anything?

[1:09:11.3]

NA: No, we're doing good. I like to check on it. I'm a little hyper about it.

[1:09:20.1]

CH: Yeah. Well, that's good.

[1:09:20.7]

NA: Yeah, we're doing great.

[1:09:22.4]

CH: It's a little late when you finish and you say, "Oh, shit. I didn't get the last hour here." [laughs]

So we get there and I had trouble getting out of the car. My right leg didn't seem to want to work. But they helped me in. I had trouble signing my name, which, of course, should have told me something. Both of those things were on the right side. By this time, I'm getting a pretty bad headache. We all paid our money, and I said, "I've got to go to the john."

And they said, "Well, we're going to go out and hit some balls. You join us out there when you get finished."

I don't know whether I passed out sitting on the commode or not, but, all of a sudden, I realized, "Wow, I've been in here for a while."

So I got cleaned up, got my clothes on, went out to join those guys. It was difficult for me to get to my card, but I did. I tried to hit a few practice shots, but I couldn't hit the ball. And then it was time for us to tee off, so we get to the first tee and I could not make myself start the club back. I couldn't do it. Finally I did, and I dribbled it along the ground. They said, "Hit another one." So I hit another one and it didn't go anywhere, and they said, "Okay. Well, we've got to go."

So we took off, and then I remember I got nauseated, and so I leaned out of the cart and threw up. It looked to me like Burger King coffee. I'd had two cups of Burger King coffee on the way down there. So I didn't know what was happening. We played the first hole. I didn't play it well. The second hole we played. The third hole—oh, the second hole was a par three. Let's say the green is that way. I hit it this way. They said, "I think we need to do something with you here. You're not doing well."

I said, "Well, let's play one more hole." So we teed off on the next hole, and I said, "I can't feel the club in my hands."

And they said, all of a sudden, I was white as a sheet, so they thought I was having a heart attack. So they grabbed, me, get me in the cart, one of them drives. They get me in the car, start to go. I said, "Go in there and get a rain check." [laughs] It was \$35. Hell's bells! 1995, that was a lot of damn money.

So Bob runs in and tells the guy that his playing partner is having a heart attack, and, "Give us a rain check." And he did. [laughter]

So we go to the ER in Pinehurst, and Larry had to help me in. I mean, this whole side didn't work. I told the person who was checking me out, I said, "I'm real nauseated. You need to get me a pan."

"Well, the nurse will get you one back there."

I said, "If you don't want me throwing up all over you and everything else, you better get me something right this minute." So that shook her up a little bit, and so she got a pan and I threw up in it.

So we get back there. The nurse puts me on this big table, hard as a rock. The doctor finally comes out. He moves a few things around. He thought I was having a heart

attack too. I said, "Look. I'm not a physician. I'm a biostatistician. But I don't think that I'm having a heart attack."

"Well, we're doing an enzyme test. We'll know in a few minutes." He never gets me up and watches me try to walk. He leaves me on this table.

Finally, he comes out and says, "Well, you're right." Now, well, it'd been a long time. He kept me in there five and a half hours, yeah, on that table. Shoo! So finally he comes out and says, "You're right. You're not having a heart attack. Do you have a doctor in Chapel Hill?"

I said, "Of course I do."

"Well, I'm going to send you home. I want you to go to the doctor when you get there."

So they helped me get in the car. By this time, I can't walk at all. Both of them have to lug me out there. We were supposed to pick up my grandson at a nursery in Pittsboro, because he was going to spend the night with us. So I said, "You guys need to go in and get him. I can't go in there."

So they get me home, and he said, "Okay if we leave you here?"

I said, "Well, Martha'll be home in a little bit."

So one of them asked Marshall, "Marshall, can you call 919 [sic] if your granddad gets sick?"

"Yeah."

So they get me back on the living room couch. By this time, the excruciating pain I was having in the back of my neck and my head had gone. I guess the clot or whatever

it was had dissipated by then, and so the pain went away. I told him, yeah, I could be all right until Martha got there.

So they left. I was lying on the couch. Marshall was playing with something, and we were talking. About that time, Martha gets home. She took one look at me and said, “What on Earth is wrong with you?” And I tried to tell her the story. Now, that was interesting to me that this nurse practitioner knows by looking at me there’s something bad wrong, and yet that idiot in Pinehurst, because I wasn’t having a heart attack, he gave up, I guess. I don’t know what he did.

“Well, we’re going to get you an MRI right this minute.”

I said, “I can’t go, honey. I am so tired. I’ve been in the ER for five and a half hours.”

“I don’t care,” she said. “You’re going to get an MRI.”

I said, “I can’t go. I can’t go.”

Well, she called every doctor she knew at UNC. She worked with Jim Bryan in the Department of Medicine, and she was not going to take no for an answer. But I made her a promise. I said, “I tell you what. If you will help me get in the bed—well, first of all, let’s stop in the bathroom and let me pee. If you’ll help me get in the bed, if I’m still like this tomorrow morning, I’ll go.”

Well, she finally gets in touch with Jim Bryan. He says, “He needs an MRI right this minute.” [laughs] Shit. I was outnumbered. But I prevailed, because I was exhausted, really.

So we get into bed. At 1:00 a.m., I woke up and I said, “I *really* have to pee.” I had tried to pee before we got me into bed, but I couldn’t do it. So I tried to move, but I

was paralyzed from here down, neck down. Turns out the spinal infarct was C2 to C6, shifted slight to the right, which is why this whole side didn't work.

So she calls the rescue squad. I said, "That's probably a good idea. Why don't you go ahead and call them in. I think maybe I do need to go, yeah."

I couldn't pee again. But we got me to the ER—well, they did—and they did they MRI, and it showed this lesion, they call it, in my spine. My neurosurgeon, I'd been a patient of his for about two years, because I'd had a lot of trouble with my low back. He never did operate. He gave me a bunch of exercises to do, and they really helped. I was amazed. A little aside there, he said, "Most people prescribe these exercises, they want you to do them morning and night." He said, "If you'll do them in the middle of the day also, that third time makes so much difference, you can't believe it." He said, "Even if you only spend five minutes doing them at noon—." I did. My lower back got well. I never had to have surgery. It was amazing to me.

So anyway, the State health plan let me stay in UNC Hospital for five and a half weeks. [laughs] They have you out of there now in five and a half hours. Really. I'm not sure how that came about. But I went to OT [occupational therapy] for an hour in the morning, went back and collapsed in my bed, I was so exhausted. I went for an hour to PT [physical therapy] in the afternoon, came back and collapsed in my bed. I still couldn't move my arms, and so my friend Larry Kupper, who teaches in biostat—well, he's retired now like I am, but—he came and fed me lunch Mondays and Wednesdays. Jim Bryan fed me lunch on Fridays. And somebody else on Tuesday and Thursday. I can't remember who it was now. But they really took good care of me.

And I worked my ass off in OT and PT, because I remember my PT said, “Well, what do you want to be able to do?”

I said, “Play golf.”

She said, “Well, let’s get busy.”

And so we did and I did, and it really paid off. I made three holes-in-one after I had this stroke. [laughs] Most people never even made one. I’d made one before that, so I made four all together.

When I was seventy years old, ten years ago, I shot sixty-nine at Finley. I remember Larry called up Martha. Now, you’ve got to know a little something about golf to appreciate this story. Most golfers want to be able to shoot their age, or anywhere under it is wonderful, but shoot your age, at least your age. We’ll put it that way. No more than your age is probably a better way to say it. So I shoot sixty-nine when I’m seventy. Larry calls up Martha, “Martha, guess what your husband did today?”

“What?”

“He shot his age.”

“He did? What’d he shoot?”

Larry says, “Sixty-nine.”

And she says, “He’s not sixty-nine; he’s seventy. He didn’t shoot his age.”

[laughter] Holy shit. That was *funny*.

So I worked like crazy at it. I really did. I don’t know what’s going to happen with this hip. I’m afraid that I’m going to need another hip replacement. I got one on the right. This is on the left. I don’t know why it would hurt so much when I first get up in the mornings. It takes me about an hour and a half or so to get it to calm down.

[1:22:24.6]

NA: How long has that been going on?

[1:22:26.9]

CH: Four or five months. When I tripped over that metal strip, and fell—did you—

[1:22:36.7]

NA: I didn't hear about that.

[1:22:37.6]

CH: Oh, god. Well, see that metal strip where the carpet joins the kitchen tile? My son-in-law says you're supposed to put it down with screws. They put it down with nails. He said every time you step on that thing, it depresses it a little bit, and then when it pops up, eventually it's going to loosen those nails. So late one Friday night, maybe four weeks ago tonight, I caught my toe on that thing, fell like that on the kitchen tile. Shoo! And I think I turned a little bit in midair, so that I landed on this left hip and the left side of my face. I'm going to show you what I looked like here. It was a real mess. Still is. So I don't know—well, they x-rayed it. I mean, they said they couldn't detect any fractures.

[1:23:47.6]

NA: Oh, wow.

[1:23:57.2]

CH: I know. [laughs]

[1:23:58.6]

NA: Doesn't even look like you.

[1:24:00.2]

CH: No. That's right. Shoo! Yeah, it was something. I remember when I hit, all the pain was right there, and I thought, "Oh, no. That's going to be black and blue." Well, anyway, I've been in contact with the powers-that-be over here and explained to them that I'm unwilling to take a chance. They hired some company who came and put down *exactly* the same kind of strip with exactly the same kind of nails, and he explained to me why, but it doesn't matter to me. They're going to have to do something different, because I'm not going to remember to look every time I step on that thing, is it loose or not. Anyway, I don't know whether—well, Dr. Olcott, my hip surgeon, I see him in another couple weeks and let him decide what needs to happen.

[1:25:13.4]

NA: Yeah. That's hard.

[1:25:17.3]

CH: So, Mr. Nick, I think I don't have much else to say here. Anything else you want to know?

[1:25:23.7]

NA: Hmm. I don't know.

[1:25:30.0]

CH: Did you have any questions to ask us?

[1:25:35.4]

NA: I mean, we keep a few in mind, but mostly we want to hear what you think needs to be told. But I'm curious about your experience in PT and OT. What were the doctors like? What was that whole thing like when you were recovering from that stroke?

[1:25:55.2]

CH: When I was in the hospital?

[1:25:56.0]

NA: Mm-hmm.

[1:25:59.8]

CH: Well, the PTs and the OTs were fantastic. Like, if they said, “Do ten of these,” I’d do ten and I’d say, “Can I do ten more?”

“Well, if you want to,” because I was really hell-bent and determined to get well.

My doctor was the head of the physical rehab and something department. They’re called physiatrists. I don’t know how you spell that, but that’s what he was called. I mean that’s his title. He’s a physiatrist. He’s no longer there. He went to Houston or somewhere. Dr. Lee, Mike Lee. He was Asian, really a nice guy. I enjoyed working with him. He would check me out and tell me things to do and not do. But the OTs and PTs were really special. Yeah. Now, it didn’t hurt that my PT was beautiful. [laughs] It didn’t hurt a bit.

[1:27:31.7]

NA: So they seemed to know what you needed, huh?

[1:27:38.8]

CH: Yeah. They did, yeah. Yeah, they’re pretty smart people. I think occasionally you get one who’s not so smart, but, for the most part, all the ones I had were pretty smart.

[1:27:50.1]

NA: So back then, it was playing a round of golf that got you up in the morning?

[1:27:59.0]

CH: Yeah.

[1:28:00.9]

NA: What about now? What do you look forward to?

[1:28:02.0]

CH: Playing golf, but I don't know if that's going to ever come about. It will have been three years in—well, I had the stroke July 25th, 1995. The last time I played golf was in October of 2015.

[1:28:26.6]

NA: Yeah, almost three years.

[1:28:30.2]

CH: Yeah. Way too long.

[1:28:34.3]

NA: Way too long.

[0:00:00.0]

CH: Yeah. It takes a lot of determination and energy to do all those exercises you need to do to get well, and I haven't had the stamina to do it. I haven't had the stamina. It's too bad, but I haven't. So, yeah, I think about it a lot. I've started trying to do some things, and I do go to PT twice a week and he helps me work on my core strength. We're trying to get this hip so it doesn't hurt so much so I can do some other stuff, but, so far, we haven't had all that much success with it, which is why I finally decided to go see my hip surgeon. I've had two shots in my hip, cortisone shots, and they help a lot, but it hasn't gotten so it's painless, and I don't like that.

[1:29:48.5]

NA: Besides how long it takes for it to calm down in the morning—

[1:29:55.2]

CH: Yeah, that's the pits.

[1:29:57.5]

NA: Do you carry that—is it with you like all the day?

[1:30:01.4]

CH: Yeah.

[1:30:04.3]

NA: That is the pits, man.

[1:30:05.7]

CH: [laughs] I know. Shit.

[1:30:08.0]

NA: Ain't no other way to put it.

[1:30:09.3]

CH: That's right. That's exactly right.

[1:30:18.6]

NA: So I guess there's PT here at Galloway Ridge.

[1:30:22.1]

CH: Yeah, right next door. Yeah.

[1:30:25.9]

NA: Where's your hip surgeon?

[1:30:27.5]

CH: UNC. But it takes so long to get an appointment with anybody at UNC, and as I understand it, it's the same way at Duke.

[1:30:46.6]

NA: I wonder why that is.

[1:30:50.9]

CH: Well, because they're both teaching hospitals, and I guess they can't see but so many patients. I don't know. I'm not sure why it is. I don't know.

[1:31:07.3]

NA: They're teaching hospitals, but have you ever been given care by a student while you were there? I'm not sure how teaching hospitals work. What's your perception of it?

[1:31:12.5]

CH: Well, what typically happens is that when you get there, your physician will ask you, "Is it okay if I have a student coming in? He's a resident," or she is.

"Yeah, that's fine."

So the resident will come in. They'll try to gather all the data they need all the information. Then they go out and present the case to the attending, and then they come back in together. And so the student hears all this. I don't want a student operating on me and I don't think they do. I'd rather had the attending who can do it. I know the student's got to learn, but I don't want him to operate on me. [laughs]

[1:32:09.7]

NA: Yeah.

[1:32:13.5]

CH: So that's how it typically works. I guess in a private hospital, you don't ever see a student because there are no students there.

[1:32:23.4]

NA: I'm still thinking a little bit, too, about Martha's death and how unique that story is about her speaking to you at the end.

[1:33:01.1]

CH: Yeah. That was really something, I thought.

[1:32:44.5]

NA: After seeing her and your mother both towards the end, have you thought about yourself, like what you would want it to be like towards the end of your own life at all? [1:32:59.3]

CH: Yeah. If I get incapacitated, I want hospice. I want to be cremated. My daughter knows that. I'd like to have my ashes sprinkled over at the farm. She can use them to fertilize some plants. [laughs]

[1:33:25.3]

NA: I think I like the idea of cremation. It seems like a good thing.

[1:33:44.1]

CH: Well, my mother told me that when my dad died, 1947—we were living in Kinston—he wanted to be buried in Hohenwald, Tennessee, because he had bought his mother and daddy a house there and he wanted to be buried near them. Well, the funeral home director in Kinston told my mother that she needed to buy a real nice casket. He sold her a solid mahogany casket for \$5,000, 1947. I mean, that's unconscionable, as far

as I'm concerned. Shoo! Five thousand dollars. She bought the whole farm over there for \$5,500, 78 acres.

[1:34:54.8]

NA: Wow.

[1:34:56.8]

CH: And that son of a bitch—yeah.

[1:35:00.5]

NA: Did y'all get your daddy over to Tennessee in the end?

[1:35:06.3]

CH: Yeah. The undertaker rode on the train with the casket. Of course, you had to pay for all the tickets and everything. And then she went with some of his brothers or somebody. I don't remember now exactly who she went with.

So she wanted to be cremated, so we cremated her and we spread her ashes down in her garden. She *loved* to work in her garden. And I oftentimes say if we had sold that farm to somebody who wanted to put a housing development there, I said what would have happened was that, all of a sudden, there would have been this big whirlwind down in her garden. You would have seen a cloud of ashes come up, and she would have come up and blinded everybody. [laughs] Yeah.

[1:36:14.6]

NA: So that farm is still in the family?

[1:36:16.1]

CH: No. We sold it two years ago to a couple from Charlotte. The wife grew up in Chapel Hill. She wanted to get back over here. The husband is *filthy* rich. God! He

spends more money on that damn farm than you can possibly imagine. I mean, seriously. I you can't believe how much money they spend. But they bought it, they paid for it. They promised not to put a housing development on it. So be it. It's their land. They can do what they want to do with it.

[1:37:04.7]

NA: It's interesting how ashes can tie us to the land a little bit. My brother's ashes are on my family's land back home.

[1:37:17.9]

CH: Your brother's?

[1:37:19.4]

NA: Mm-hmm, yeah. I don't know if they'd ever sell it.

[1:37:21.6]

CH: What did he die of?

[1:37:24.6]

NA: He was in a motorcycle accident.

[1:37:26.5]

CH: Shit.

[1:37:27.5]

NA: Just one of those things, you know.

[1:37:31.0]

CH: Shoo. I sold my little motorcycle. I had a Honda XL65 about this tall. It would run pretty damn fast. It'd run 60-some miles an hour, at least. That's all I know it would run. It's so small that I tried to ride it to school several times, but you get crunched

in between two cars or—yeah, so I said, “Uh, I don’t think I’m going to do this anymore.” Yeah. I never was a big motorcycle person, anyway, so I didn’t have a good helmet. I’ll put it that way. I remember there was a sign in the motorcycle shop in Chapel Hill maybe on Graham Street, I don’t know, over there in Carrboro somewhere. There’s a big fancy-looking helmet up here on the wall and then an “El Cheapo,” and the sign says “If you have a ten-dollar head, then buy a ten-dollar helmet.” [laughs] Yeah.

Well, I told my students a joke a day, just about, and I must admit they got a little raunchy near the end. I shouldn’t have done that, but I got a little carried away. I don’t know why. I just did. [laughs]

There’s this woman that taught our water aerobics class, and she was always coming in with a corny joke. “Did you hear about the nearsighted porcupine?”

“No. What happened?”

“He fell in love with a pincushion.” [laughter] That was one example. I mean, there were others.

[1:39:43.0]

NA: Yeah, sometimes the corniest ones get you the best.

[1:39:44.4]

CH: That’s right. There were others like that. [laughs] I don’t remember her name. That’s another thing I haven’t done, is gotten back to water aerobics. Damn. And I really and truly think it was one of the reasons why when I got out of the hospital after the stroke, that I kept getting better, because I went to water aerobics three times a week, not here, because I wasn’t living here. It’s when it used to be at Eastgate Shopping Center.

[1:40:19.1]

NA: Why do you think it's so hard to get down there now?

[1:40:24.7]

CH: I think I haven't had the energy to do it. But I did ask David, my PT, the other day, I said, "David, ain't it about time that I can get back into water aerobics?"

He said, "Let's get your hip more stable before we do that." And I guess that makes sense.

[1:40:47.2]

NA: Well, won't be long now till you see the hip doctor.

[1:40:52.2]

CH: Shoo. I know. Let me see if I can find out when that is right quick.

[1:40:59.6]

NA: Yeah. No problem.

[1:41:02.0]

CH: There's that guy with an ugly face. Lord have mercy. [Allen laughs.] Woo! Calendar. Here it is right here. All right. July. I know it's July. Okay. We'll start in next week. I don't think that's it, but—damn. Damn. Doctor Olcott, July 24th. [Allen whistles.] See, and I made it a month ago.

[1:42:04.4]

NA: Wow. Man, that's rough.

[1:42:08.8]

CH: I probably need to send him a note saying, "Put me on the cancellation list." I don't think I did that when I made the appointment.

[1:42:20.6]

NA: Oh, yeah, yeah. After all your experiences in the medical system, if you had a magic wand to fix one thing, what do you think you'd go after?

[1:42:31.8]

CH: I think having to wait that long for an appointment. I mean, what he would say if I confronted him about it, he'd say, "Well, Carl, you can always go to OrthoNow," the walk-in clinic. He said, "They'll know what to do with you." Well, that might not be a bad idea. I mean, hell, it's almost a month away, isn't it? Maybe I'll try that. Yeah. I don't have anything to lose.

[1:43:15.1]

NA: But still, you should be able to see your care provider. You shouldn't have—I don't know. Two months seems like a long time.

[1:43:17.6]

CH: It does.

[1:43:18.8]

NA: What do I know, but—

[1:43:19.8]

CH: No. That's exactly right. So that would probably be one thing.

I think I've had very excellent care around my surgeries. Olcott replaced my knee about fifteen years ago. I had a hip replacement and also a shoulder replacement. Olcott did the hip. What's his name? Shit, I don't know. Anyway, another one did my shoulder.

Well, I was having all kinds of trouble with my stomach, bad stomach pains, and they didn't seem to know what the problem was. So I can't remember how I came upon

this, but the medicine they give you for ocular myasthenia gravis, I remember I was looking at the side effects on the web one day and it said something to the effect that oftentimes it causes stomach distress. Well, now, before I ever read that, I'd had five GI procedures. I mean, why nobody ever thought about taking this drug maybe is the problem—and I did confront my GI doc. Well, let me back up a second. So I decided to stop taking it. I told my—whoever. I can't remember whether it was her or one of the other doctors. But I've now had five GI procedures, one of which is an ERCP or something, but it's when they go down inside and then actually look in each of your organs, look inside.

[1:45:44.7]

NA: Wow.

[1:45:44.7]

CH: The R is "Retro." They go inside. Shit. They never found anything. They did find one little stone one time in my gallbladder. It was lodged in one of the ducts, and so they didn't even take it out. They thought that by doing something, it would pass, and I don't know whether it did or not. I think I remember that it did. But, nonetheless, I stopped taking the medication, and within three days, my stomach had stopped hurting. So I had an appointment with her. Safali [phonetic] is her first name. She's from India, but she's lived here for a long, long time, I think. So I said to her, "Safali, I'm surprised that you didn't think about that."

And she said, "Well, I never heard of it being a problem, so it didn't occur to me." That was pretty honest. I guess you can't think about something if you have never thought about it or heard about it. I don't know.

Anyway, so I stopped taking it. And then my myasthenia gravis doc prescribed another drug. There are two that you can take. Well, it did exactly the same thing. Exactly. Started having stomach pains. Shoo. So I taught both of them a lesson. [laughs] So that was a bad experience, I think.

But then I had my gallbladder removed. I had a bigger hernia repair. That went well. I had my gallbladder removed. That went well. Same guy did both, even though I didn't particularly like him. I can now drink a beer without having to think about, "Is this going to make my stomach hurt?"

I finally had to start taking ibuprofen because this hip was bothering me so much, and it really works a lot better for joint pain than Tylenol does. A lot better. But after I'd taken so much of it for some period of time now, it had begun to bother my stomach. So this morning when I got up, I knew I had to take something because it was hurting so bad, so I ate a bunch of antacids, these little tablet things that you chew up, and then I took four Ranitidine. Ranitidine is the drug that's in Zantac, and Zantac costs about twice as much as this, but it's exactly the same thing. So I took four of those and I ate four of those and I took either three or four ibuprofen, and it stopped hurting in about thirty minutes. And, so far, it hasn't bother[ed] my stomach.

[1:49:29.7]

NA: Good. You might have found a winning combo there. What was it about the guy that did your gallbladder that left a bad taste in your mouth?

[1:49:41.8]

CH: Say that again about my gallbladder.

[1:49:41.8]

NA: The guy that took out your gallbladder, you said you didn't like him much.

[1:49:48.9]

CH: No. He was a little too arrogant, and there was something else. Rossie had been with me. She didn't like him either. So I can't remember now exactly what it was.

[1:50:02.4]

NA: No worries.

[1:50:03.9]

CH: I was not going to let him do my gallbladder, because he had done the hernia repair first. But then I got to thinking, well, he knows what my innards look like and he's already been in there, so I finally decided, yeah, go ahead and do it. I mean, I looked him up on the Web, and he has a very good reputation, so I said, well, what the hell. Let him go for it.

[1:50:40.8]

NA: And it went all right?

[1:50:43.2]

CH: It did.

[1:50:43.2]

NA: Good.

[1:50:44.5]

CH: Went all right. And I'm glad I had it done, because things that used to bother my stomach don't seem to bother me anymore, so that's good.

[1:50:54.5]

NA: Lord knows, if you can have a beer, that's a blessing right there.

[1:50:57.9]

CH: Shoo! Boy, I'm telling you. Man. Yeah.

[1:51:02.5]

NA: Well, is there anything you want to add, Carl?

[1:51:11.1]

CH: I was thinking I can't—

[1:51:12.1]

NA: I don't want to take up too much of your afternoon.

[1:51:13.4]

CH: Whew! Boy, I've already told you a bunch, haven't I?

[1:51:15.7]

NA: You sure have. I'm really grateful. You've got some real interesting stories.

[1:51:20.2]

CH: Well, thank you. Anything that you can think of that I didn't talk about or that you want to know any more about? I mean, you can always do what you did with Rossie. You can always call me back and say, "Hey, I didn't get this part," or the machine malfunctioned or something.

[1:51:37.3]

NA: Yeah, I won't hesitate to if I come across anything when I'm listening to the interview.

[1:51:42.8]

CH: Right. Yeah. So does somebody transcribe this, or what happens?

[1:51:47.6]

NA: Yeah. So this'll be transcribed, and I'll send you a copy and you can edit it as you see fit, as you need to. And then after that process is over—those won't be till early fall, probably, that we get those transcriptions back. Pending your signature, after this, we'll post it on the archive for researchers to look at, and we'll get you a copy of the audio file, if you like, as well as the transcript file to be a part of whatever you want to use it for.

[1:51:47.6]

CH: Okay.

[1:52:25:8]

NA: All right. Then I can hit the stop button on this now.

[End of interview]

Edited by Nick Allen.