Speaker 1 ([00:02](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2.32)):

Hi everyone, and welcome to this interview. My name is Suzanne O'Brien. Today we have a very special guest. We have Jody Stockham. I am so thrilled. This is a wonderful woman, as you are going to see, I call her my friend. Um, and you're gonna learn a lot. And I have learned a lot. And my heart just opens wider with people like Jody in the world. So, Jody, thank you so much for being

Speaker 2 ([00:26](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=26.63)):

Here. Thank you for having me, Suzanne.

Speaker 1 ([00:29](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=29.71)):

All right. The first thing that I wanna ask, um, you, is to tell us how, how you found myself and doula givers. Can you tell me your story, please?

Speaker 2 ([00:38](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=38.659)):

I found you and doula givers before my diagnosis. Mm-hmm. <affirmative>, I was always attracted to the hospice model, the compassionate model, the merciful model, the reasonable model, um, and, uh, the bereavement model. And so I was involved and was always coming at life from that point of view. Actually, I just posted something recently that said, life is so, so much more beautiful when you take a step back. Earth is more beautiful from the moon. Life is more beautiful from the perspective of death, from end of life. Yeah. And that's was always my approach. I'm one of those people that, you know, when I read a book, I start at the end. I read the last page. I just have to know, I have to have that take a step back. That that perspective. And so one thing led to another. I became aware of hospice probably in my thirties and volunteered and, um, learned so much about, uh, the family model, the disease model. Mm-hmm. <affirmative>, the merciful model. And years went by and recently came across. I i, it must have been through social media that I came across you. And I came across the idea of an end of life. Ula. I never had kids. And so the whole

Speaker 1 ([02:03](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=123.71)):

Yeah.

Speaker 2 ([02:04](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=124.39)):

Model of I'm under a butterfly, um, bush that attracts butterflies and bees. So if I'm waving things away, it's, it's not my fans <laugh>. It's the bees. Yeah. Yeah, exactly. Um, so yeah, No, no, I just lost my, ever since they told me that this could possibly net to the brain, I've decided that I'm losing my mind. <laugh>.

Speaker 1 ([02:30](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=150.59)):

Oh, well, no, I mean, look, I think that we all have those moments, so let's just stop there for a minute. Cuz I think what you said is very significant. And I love the fact of always being attracted to that holistic, what I would call holistic model, the whole self, the, you know, you call it merciful and, and everything. And then I love when you talk about stepping back and looking at a view from above. And I also call that the heart lens, the bigger perspective, the one with all the wisdom that can really make sense of all those, you know, things that we go through in life and that, that seem so heavy and, and blocked in. So I love that. Now, the other thing that you shared is that you don't have children. And that is a very common thing right now that we, and we have an aging population that, you know, usually it's the adult child, not always by the way that cares for parents, but there's a, there's a very large, almost 20 million in the United States population that over 65 that don't have children. My concern is what are we doing for them? How do we show up and care for them at the end of life? And that was another reason why doula givers was, uh, started.

Speaker 2 ([03:34](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=214.5)):

Yeah, it's interesting. The reason why I mentioned that is because, uh, doula has always been a model for a new mom. Mm-hmm. <affirmative> a new family. And so it really wasn't on my radar mm-hmm. <affirmative>, but I want everything. I'm just a greedy little girl, and I want everything on my radar, and I'm gonna figure out a way to get everything on my radar.

Speaker 1 ([03:57](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=237.63)):

Yeah. You like a sponge.

Speaker 2 ([03:58](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=238.9)):

Yeah, exactly. And so when I came across the idea of end of life doula givers, I got very excited about. I was like, There's a way, there's a way I can do this. Yeah. Then I got very excited about that, and when I started to explore it, um, I, and it, like I said, this was before my diagnosis. Yeah. I wanted to know more. I did your level one and just loved the heck out of it. I loved the way it broke down how it happens. I love to garden. I'm a pet person. I am, uh, in interested in the process. I'm interested in how leaves fall off and when pets fall off and when the animals, you know, start to go into, you know, small little places because they're, they're preparing for a transition that always interested me. Yeah. And the idea that an end of life doula giver and, and your and your program could break that down. What does the breathing look like? What does the, the energy look like? What does the thirst look like? What does the hunger look like? Um, it made more sense of life to me than just the belly of life where nothing really changes that status quo of life.

Speaker 1 ([05:08](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=308.49)):

I'm so pleased about that. And I think that this is something again, that I really want people to hear, is that death is the number one fear in our world right now. And when we don't know about something, it creates this, this fear around it really with no merit at times, because we don't really know. And when we learn about something, whether we even like what we're learning or not, there's a sense of calmness that goes along with that. However, because we just know what to expect. But with end of life, there's so much beauty. Like you started this conversation saying that look, looking at life and living life through the lens of death is how you wanted to look at life because you wanted it to be this full experience. And that's how we have a full experience by knowing that one day, it, it won't be the same by living with that awareness because you appreciate and interact so differently. So that, that is wonderful. So when you took the level one, it brought you, it brought you peace.

Speaker 2 ([06:09](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=369.089)):

I loved the level one, then of course I got my diagnosis. Yeah. And I immediately reached out to your organization and immediately got a positive response. Somebody right down the street, I mean, Leno metaphorically, she's probably, you know, 40 minutes away, she and I had a nice conversation. She was responsive, she gave me, and I appreciated her boundaries. Um, she's a professional mm-hmm. <affirmative>, and she's out of volunteer. And I appreciated knowing that there's a price tag to it, because there's a value to it. Yeah. I appreciated that. Mm-hmm. <affirmative>. And she told me a little bit about what I was, I came to her very early on. Yeah. Um, didn't know what my needs would be, and just kind of kept her in my backpack. Of

Speaker 1 ([06:56](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=416.38)):

Course,

Speaker 2 ([06:57](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=417.07)):

He checked in with me. I appreciated that.

Speaker 1 ([06:59](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=419.93)):

I love that. Which is super smart, by the way. But let's go back to, if we may, when you got diagnosed and, and what, what, what you're going through with that diagnosis and what was it like when you first got diagnosed?

Speaker 2 ([07:10](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=430.96)):

When I first got diagnosed, it was the tail end of a long line of negligence and unprofessionalism and, um, uh, confusion and, um, not being heard. And so it wasn't a positive experience. I believe it could have been, but that's just me. Sure. Yeah. You know, I, I train in a gym. I think a positive experience, you know, is pain. Not necessarily pain, but pain is a messenger. Yeah. Um, information can be a positive experience. Well, sure. But it was not a positive experience. And so that is the best way that I can put it. Um, I had some interesting reactions from family members, from friends. Um, I had always felt an alternative, um, lifestyle in the sense that I fell outside of the quote unquote, I'm in, in New York. I don't know. Are you in, you're, you're in America? Um, North Carolina

Speaker 1 ([08:17](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=497.09)):

Right

Speaker 2 ([08:17](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=497.33)):

Now. North Carolina. Yeah. Um, certainly, you know, in, in my neck of the woods, um, you know, falling outside of that system is called alternative. I don't call it alternative. I'm just trying to be convenient. Exactly. Um, and, and, and, and, and relevant. Yeah. So I'm using that word. Um, and I had some interesting reactions from people who actually flat out said to me in my face, Well, what the heck do you think I've been doing all these years? I've been taking care of myself and et cetera, et cetera, et cetera. So it was kind of interesting that there was so much judgment and finger pointing, um, because again, ovarian cancer is, uh, not something that it falls under, uh, a gyn regular appointment. Um, there are no regular tests for it. Um, the ca 1 25 blood draws, not necessarily, it just should really reflects information. Yeah. Um, but without getting too technical and too far off of the Yeah. Um, doula givers, uh, topic, um, it was not a positive experience. And like I said, it could have been.

Speaker 1 ([09:25](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=565.15)):

Yeah. And I agree with you, Jody, and I just, I want, I, I wanna be with you and, and just wrap my arms around you. So I'm giving you this virtual hug right now. I wanna share with you, because I've worked in oncology, so I've been that oncology nurse and I've been that hospice nurse. And I wanna share with you that that's not an uncommon experience, unfortunately. And this is very sad. And I think, and I wanna share this again, let's go from that heart big view, right? So many people are so fearful of end of life. Even our doctors are taught to fix things, to keep it going at all costs. They're not looking at the big picture that when we have our moment, that our, we know end of life is gonna come for each and every one of us. Right. We don't know when that's gonna be how it's gonna be delivered, but I think it just brings up everyone's stuff.

Speaker 1 ([10:16](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=616.42)):

And a lot of times people's self projection and their fears get directed in the wrong way. So I just wanna really shower you with love, because I've seen this over and over how family members or other people will sometimes point the finger. And it's like mind blowing. And I know they don't mean to be mean and do the wrong thing, but because we're so completely bonkers with end of life not being a natural part of it, that it really goes very left, um, in many ways. So I just wanna wrap you in that love. So you have, you received a stage four diagnosis, um, for the ovarian cancer. You had already been, bless your heart, doing some doula giver's work, and also you had been, you know, been with hospice and knew about that. And so then what did you do? Where did, where was your next move?

Speaker 2 ([11:07](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=667.55)):

I went to, um, Sloan Kettering, um, in New York. It is considered the best. Um, of course, I, um, immediately it's like Grand Central there. And the first day that I walked in there, I turned to my to B husband at the time, and I said to him, I don't belong here. I must have said it a hundred times. Yeah. I thought he was gonna stick pins in his eyes and then stick pins in my eyes. I couldn't stop saying, I don't belong here. Yeah. Don't belong here. Yeah. Um, and it wasn't me being in denial of my, um, diagnosis. It was me having a reaction to a modality that it was like me trying to squeeze into a size one. Yeah. It didn't fit

Speaker 1 ([11:50](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=710.8)):

Right.

Speaker 2 ([11:51](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=711.48)):

Um, and I, I, so, so that, that was, that was the next step for me. I, I was so crystal, but I gave it a try. Yeah. I gave, I gave it a try to be perfectly honest with you, for my loved ones.

Speaker 1 ([12:06](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=726.94)):

Right.

Speaker 2 ([12:07](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=727.34)):

Um, and I put that in quotes because I'm not exactly sure, um, if that's where they were coming from. Um, my fearful ones, I wanna call them. Yeah. I, I, I, people begged me cried, clung to, to my pan legs. Please try to live, try to live. It was, I mean, it was worthy of an Emmy. I wanted to go to TJ Max and get, get new outfits for, for, for when they won the award. Yeah. They were begging me <laugh>, you know, Please.

Speaker 1 ([12:39](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=759.57)):

Yeah. I'm sorry. I feel like, again, this just has that thread of fear that comes through and I see it as well, Like, I see people especially, um, who are very advanced in their disease processes and there's no chance of reversing it. Families doing the same thing, asking them to do this and do that. And sometimes those things are, are painful, um, what they're asking them to do, and when there's even no chance of it reversing or extending. So I think, again, we really want to bring the light into having death be our best friend, because that's how you live the fullest. And that's again, what we're really gonna shine the light on with you, because your emails and our exchanges are so beautiful with just your, again, the light that you bring to this. And then speaking from the position that you're in right now, you have such, um, a message to share with other people. So understand that, you know, we do things for our loved ones, but my hope is that we can get this conversation out, that everyone will respect everyone's wishes and be okay and not project on them, just because I know that that can get a little funky. Um, so when you discontinued, um, Sloan, what did you do then? Did you start, like, did you reach out to, How did, how did that go? What was the next step there?

Speaker 2 ([14:00](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=840.42)):

I waited until I was hospice appropriate, and then I was on cow. I would go there. Good. I was like, Sign me on. I'm gonna say, And hospice

Speaker 1 ([14:08](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=848.83)):

Is wonderful.

Speaker 2 ([14:10](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=850.07)):

And oh, golly gee, it's wonderful. And what's interesting is that the medical oncologist, I remember as I was leaving the office, um, just patted me on the shoulder and she said, Good luck, dear. And I remember thinking to myself luck. I thought this was science. I remember thinking, I, I don't need luck. Good luck. Good luck at what? Escaping death, living to 900. I didn't quite know, but I digressed. So I immediately dabbled, skipped, and hopped. I could not wait to sign up. And my, by the time I was, um, admitted onto the hospice program, I had probably gone several days without eating. I could barely lift my head. I hadn't been outta bed. Okay. Um, it was, uh, I, I thought, I guess I'm one of those people that's gonna drag my oxygen tank, you know, into, you know, my, my final moments broken and bleeding. And I will be one of those people that they said, Did you hear she got into hospice? Just in time. I thought I was gonna be one of those people. Fast forward, if I told you how I had a SCADA and spadu just to make this interview this morning. I was so busy. I'm thriving. I am. I love so

Speaker 1 ([15:32](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=932.56)):

Much, Jody, I love you so much in so many ways. When you were like, Well, we're gonna do this, and you're like, eight o'clock in the morning on Thursday. I'm like, Okay. And then when you got on here and you're like, Oh my gosh, I have been doing so many things before and to get here. I'm like, I love you. I love you. I love you <laugh>. So let's, you know, hospice is so incredibly beautiful and you know, I really want people to know, look at how you shine and what you're doing. Getting on hospice early is one of the best things we could possibly do. So when you said, you know, one of those people who just made it in time, I have to say that yes, it's important at any time that you can get on hospice is really important, but the earlier you get on, usually the better this whole experience and the end of life goes because there's so much richness here. So let's talk about hospice, let's talk about doulas, let's talk about that beautiful spectrum of holistic, loving care for somebody in your space. And actually everyone in our life. Cuz we need to get back to that holistic model of love and compassion.

Speaker 2 ([16:35](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=995.23)):

I have no doubt that an end of life Ula giver would have been very supportive and encouraging. Mm-hmm. <affirmative>, um, as I exited Sloan and entered hospice mm-hmm. <affirmative>, um, it just, uh, wasn't the path that I took. But I would encourage absolutely anybody to reach out for that transition. And then of course, for people who choose not to be, um, on hospice or for people who are not hospice appropriate, there's nothing better than that. That, that model of an end of life really giver because that is the support and encouragement. I like hospice because it is integrated. It is the disease model that I love. It's spiritual. They come to the house. Yeah. It's emotional. They come to the house. It's difficult. The nurse comes to the house. I am not sitting in a medical facility with my arms stuck out for six hours. Yep. You know, it's, they come to the house.

Speaker 1 ([17:32](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1052.95)):

Everything comes to the house.

Speaker 2 ([17:34](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1054.859)):

Yes. And it's paid for at least here in, in America in New York. Yeah. Um, it's paid for. Yep. I am, um, campaigning and raising funds cuz I chose to have probably a little too early, but probably not. I chose to have a private, uh, home health aid. Um, he's here 120 hours a week. That's what I can afford right now. Um, and he is the support and encouragement that's appropriate. My husband would be drowning and worry and um, and, and would lose his sense of himself.

Speaker 1 ([18:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1093.43)):

Yeah. And this is important because I think that as be and hospice, I love hospice. I love the people that work for hospice is such a beautiful model of care. And it's very misunderstood in the public is what, what I know. But they also, people don't fully understand the, the amount of time that everything comes to your house. But the nurse will come for a time period. The social worker. What about all of that other time that you're home? And I love that you just shared about understanding your husband's needs and what would it be like for him and having that other person that knows end of life to be there to hold the space. And that really is, again, the definition of a doula giver. Now you have it with a home health aid. Beautiful. As long as we understand what's needed in that dynamic for everyone.

Speaker 1 ([18:58](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1138.2)):

Not just for you, but for your husband as well. So I love that you did that. And I think it's so important for us to understand how difficult it is on caregivers. You know, for me as the hospice nurse, I would come in and assess the patient and the, the model is that I'm supposed to teach the loved ones how to do the care. Sometimes I was there for only an hour visit. Periodically the fear of death. We're asking people to ca take care of their loved ones that are dying without them really knowing the first thing on how to do that. That is almost cruel. That has to change. And that Jody is again, why the level one doula givers is out there being taught every month for free to teach families how to do this, to teach people about end of life. So they don't have to be fearful to give them inspiration about what that lens could look like if we look through it at life.

Speaker 1 ([19:49](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1189.49)):

So there's just so much great understanding around what we can do here. So I love that you shared the importance of hospice. It's beautiful getting on earlier. I think the earlier the better. Knowing that everything comes to your house and then assessing what are your needs. And I think that again, one, one person cannot do end of life for another. They just can't. But I also think it's not okay that it's on one person. This is when they're saying goodbye to somebody they love so much. So when they don't know how to do it, and it's the only one and it's 24 7, that's just not fair. Let's bring in other adjunct support so that this could be the most positive experience possible. And it can be. And

Speaker 2 ([20:31](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1231.26)):

It can be. And what's so interesting, Suzanne, is that people say to me, You're so brave, you're so courageous. And I don't really understand what that means. I think you'd have to be rather brave and courageous to stick your arm out. And you never quite know if you're gonna go into ANC shop, you never know what you're going to go into. You never know what you're gonna go into when you, you know, get cut open or this, that or the other thing. What kind of complications am I gonna come out of this surgery with a bag? I think those people are courageous. Um, there is absolutely nothing courageous about, It's, to me, this is gonna sound really nuts. Um, but it's like saying you're courageous for opening a letter, opening a birthday card, opening a message. It's just a message. That's all it is. This is what's going on. This is what's happening. You're courageous to read the facts, read the truth. You're courageous to learn. You're courageous to embrace life fully. You're, you're courageous to eat that last little to to lick that last little piece of cake off of the for how is that courageous? Yeah. That's just embracing the entire life, The entire meal, the entire gift that we get when we're born.

Speaker 1 ([21:43](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1303.64)):

So let me ask you this, Jody. What, what do you think the world would be like if we could bring back that awareness early on in the journey? Talk to our children honestly and openly, age appropriately about the life cycle that we have with nature and with animals and, and everything that happens. And looking at life from the very early stages, not at the end the very, with that kind of lens on what would our life be like? What would this world be like?

Speaker 2 ([22:11](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1331.19)):

I think it would be so much more relevant. It would be so much easier to relate to other people. Absolutely. There's a picture of me. I had started, um, this morning by saying that I never had kids. And that was relevant to the fact that doula wasn't on my radar until we started, you know, being aware of your model, which is end of life. Mm-hmm. <affirmative>. But I just changed my, um, cell phone screen picture. Um, it's a picture of I'm, I'm in a, in a van and, um, the one of our newest members just, um, uh, he had a baby 11 months ago. And, um, uh, there is, somebody had said to me, Do, do you wanna hold the baby? They always say to women, Do you wanna hold the baby? And I, and I always say, No, no, I don't wanna hold the baby, but I did wanna get down on the floor and be the baby.

Speaker 2 ([23:01](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1381.42)):

And once I was down on the floor, you know, there was me relating to the baby. I'm comfortable on the floor, I'm comfortable on my knees. I'm comfortable at that level. Um, I think that it would, we would see each other more relevantly. There, there, I I've always felt that it would be a more relevant, peaceful world if we could, um, identify the similarities in each other and, and go, ge what, what more of a similarity could you possibly look for than life and death? That is what we all have in common. That's right. Not our language, not our skin. That's the kinda hat we wear. Not the amount of digits we have in the bank, but the fact that there's a beginning and an end. There will be a, we will all experience the last breath. It would be a relevant world.

Speaker 1 ([23:50](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1430.88)):

Oh, it's humanity, right? And it's best. And when you take death out of the equation like we have now, you have care. It's not,

Speaker 2 ([24:00](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1440.96)):

It's,

Speaker 1 ([24:02](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1442.49)):

So when we bring that back and we say, Wow, you're no, no different than I am. In fact, you have the same worries and struggles and, and things that we go through in the same heart. That that awareness of end of life death is our greatest teacher. About how we are similar and how time is our greatest commodity and how kindness is something and presence is what we can give to each other every single day. And that can change the world. So Jody, you just said it, so let's bring that back because that is how we change the world. You know, everyone is yelling about this law and I and that president and everything like that. That's not how it changes. It changes with the perspective changing of getting back into the heart and that we're all similar and being there for one another. Love that. Jody, can you tell me what your life is like today?

Speaker 2 ([24:51](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1491.85)):

I don't even know where to begin. I can't get up early enough. <laugh>. I'm putting together a couple of fundraisers right now to fund my home care. And the very first, um, fundraiser that I, um, had put together was a go fund Jody's Joy.

Speaker 1 ([25:07](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1507.14)):

Yep.

Speaker 2 ([25:07](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1507.68)):

And the second fundraiser that I put together that I'm working on is going to be a benefit concert at the local library. The third fundraiser. Cuz I tend to project, I'm, I'm just kind of a type A doer. I'm the exact same person I always was. Yeah. So my third fundraiser is projected into November, December and it's back to my roots. You know, I'm a cook and um, I had, I wrote out two menus with Ukrainian themes and um, I wanna sell dinner parties, eight to 10 people. Um, and they're gonna be held in people's homes, kind of Rachel race style, you know, um, me just being chatty and chopping, you know, chopping with Jody's joy is what it's gonna be called. I love it. And yeah, exactly. And, and it's funny cuz somebody pointed out to me, Jody has the word joy in it. So now I've started spelling my name, j o behe d why? And the be the D could be delight, the D could be anything, but the joy is there. And so my day started out getting all of that prepped because I brought a chef friend of mine in, um, to practice some of the recipes.

Speaker 1 ([26:23](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1583.81)):

Great.

Speaker 2 ([26:24](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1584.77)):

So we're doing run throughs on a Ukrainian, um, on Ukraine, on a Ukrainian, um, vegetable stle. We're gonna be practicing a honey vodka with an ice cream cheese frosting. So that's how my day started. And then of course I like to run my kitchen like a restaurant. I just wanna run in there, grab my soup, keep going. So I had to get my soup prepp for the day, my chopped salad prep for the day. Cause I still do care very, very much about what I put in my body. And it's interesting to, and God bless the people that make other decisions. With all due respect. There are, you know, I'm in a local, um, peer support group for, uh, people that, um, are experiencing cancer. I choose to call it experiencing cancer because paradigm shifts happen and this is a paradigm shift. That's all that happens.

Speaker 2 ([27:17](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1637.24)):

Yeah. Um, and so as a result, you know, I am exposed to other people's choices and decisions and I respect that completely. Yeah. Um, and, and so there are many people that say, Well, you know, my doctor said it doesn't really matter what I eat at this point. So I try to chug down as many sodas as I can because that's something that I'm not gonna throw up. And I'm thinking to myself, Hmm, okay. That that's fine. That's great. I respect that. Yeah. But you know, I still want my chopped salads and I still want my healthy soups and I still want my brown rice. So I had to get all my food prepped. And then of course I had to do all my, my, my self care. I'm still massaging my skin. You know, I, I don't quite, you know, um, have what it takes to swing my 40 pound ke bells anymore. And so I'm losing a little bit of, didn't wanna kill that ant cuz he has a right to live to. Um, I didn't want to, you know, And so I see my skin kind of collapsing where those muscles used to be. So, so, and I'm just aware of that now. So I make a point of, um, you know, making sure that I, you know, get the best products I can for my skin so that I continue to feel really good about myself.

Speaker 1 ([28:33](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1713.41)):

Of course. Because there's no judgment. There's no judgment. But isn't it about feeling good every day no matter what,

Speaker 2 ([28:40](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1720.72)):

Every day,

Speaker 1 ([28:41](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1721.37)):

No matter what that means to you

Speaker 2 ([28:43](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1723.84)):

Every day.

Speaker 1 ([28:44](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1724.24)):

Right. For everyone. So I think that's beautiful and I know that from my, it talks with you and things that, it just, I feel this immense gratitude and appreciation for every single day that that just lights you up with every, with everything you do. There seems to be this just pile of beautiful gratitude energy with it, which shines from you. Um, which is wonderful and which is how we should all be living.

Speaker 2 ([29:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1753.2)):

I could have been living like this the whole time, the whole time I was going shopping all those decades. I wish I was a four. I wish I was a six. I wish I was an eight. Yeah. I don't think I would've known what to do with it if I put a size four on. Yeah. You know, now I put my clothes on and I mean, I can barely, I barely have time to zipper them up. Cause there's so much to do. Not because I'm in, in a hurry to get everything done because you, because I appreciate the ability to grind my coffee beans. I appreciate the ability to have this conversation with you. Um, as soon as I'm done, I've gotta to the bank and get a little bit of administrative work done. And then I've gotta run back because the, um, the hospice nurse is coming and she's gonna take my vitals and, and and, and she cares about, you know, am I going to the bathroom? And, and all those questions that golly g could have been asked this whole time and maybe it wouldn't have been caught at a stage four.

Speaker 1 ([30:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1813.82)):

You know, Jody, when I, when I work and I've worked with, I've had the honor and privileges working with over a thousand people the end of life. And I've often had this kind of, um, answer from people that found, finally found their joy and their flow when they got ill and when it kind of woke them open to presence and to their heart, living in their heart and living in that gratitude, which is such a magical space to live in. And you just said it, I could have been living like this this whole time. So I really want people to hear that because it's a, it's a place of really just perspective and changing the way you look at life and look at your day with not doing, but more with being being and Right. And when we be all of a sudden we connect to this greater energy and love. And I really want people to hear that because we want people not to wait but to live it now. Cuz you are a prime example of that. Um, what would you, what advice would you give somebody who gets a terminal diagnosis that would help them

Speaker 2 ([31:23](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1883.48)):

Get a group? I'm a group girl. I get better when I'm in a group. I get better when I share experience, strength and hope I get better when I'm supported and encouraged Yeah. By people who are experiencing, um, something similar.

Speaker 1 ([31:37](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1897.26)):

Yep.

Speaker 2 ([31:37](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1897.26)):

That's what I, that's what helped me tremendously. And through that, through the groups. Yep. Um, the, the peer support groups, the Gilda Club, um, whatever the groups were that I got involved in, I remember the, one of the very first things I did was call a girlfriend of mine. She was on a recurrence. And I called her and I said, I don't get you. Why don't you just kill yourself? You're gonna go through this again. The surgery again, the radiation again, the chemo again. What's your story? She said, Look for the miracles. I was like, um, you, I don't think you just heard me. I said, There aren't any miracles. What, what are you talking about? Miracles. You're going through this again. She said, Look for the miracles. That was the best advice I ever got. That was her advice to me. Um, and she was right. Every day there's been a miracle.

Speaker 1 ([32:26](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1946.63)):

You know what that is just the theme of life because I think it's so hard for so many people, just on many levels. Look for the miracles cuz they're there.

Speaker 2 ([32:36](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1956.18)):

They're there.

Speaker 1 ([32:37](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1957.1)):

They're there. Okay. And would you recommend to families and to people to take the doula givers level one, that free training?

Speaker 2 ([32:45](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1965.92)):

100%. I can't

Speaker 1 ([32:46](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1966.72)):

Take it. Take it Right. 100

Speaker 2 ([32:48](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1968.8)):

Before you mm-hmm.

Speaker 1 ([32:50](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1970)):

<affirmative> cause it. Why

Speaker 2 ([32:51](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1971.16)):

Not?

Speaker 1 ([32:51](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1971.96)):

Yeah.

Speaker 2 ([32:52](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1972.4)):

It, it, it was a comfort to me before I diagnosis. Yeah. It's a comfort to me now being diagnosed. It's a comfort to me to be able to share it. Mm-hmm. <affirmative>. Absolutely. A hundred percent It's reality. It it's, it's spiritual food. It's it's spiritual drink.

Speaker 1 ([33:08](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1988.28)):

Oh, I love that. I love that. It's spiritual food. And, and hospice.

Speaker 2 ([33:12](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1992.58)):

And hospice

Speaker 1 ([33:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=1993.66)):

And get on hospice sooner rather than later. They're available for six months or less. And you can even get re-certified on them if you need to. They're wonderful. And like you said, they come to you. Everything comes to you. Yes. So, Jody, you are such an inspiration. I love you so very much. And I know this is going to help so many people because it's fantastic for me to share what I know from my space. It's, it's a whole nother perspective when you hear from somebody who's actually in that space, opening your heart and sharing it with the world. And we love you so very much. Now I know that you have a GoFundMe page. Can you share what that GoFundMe is for and then how people can donate to you?

Speaker 2 ([33:55](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2035.28)):

Absolutely. The Go fund, um, the GoFund Me page is for Jody's joy. It is specifically so that I can, um, cover the expenses of a private home health aid. He is not through an agency. Um, I wanted him, he, and I wanted him because I remember when I knew him a little bit through a case that we had both caught. I was already in home care at the time mm-hmm. <affirmative>. And so I was on the case as a companion. He was on the case medical. So in passing each other in the hallway, so to speak, we got to know each other a little bit. So when I got my diagnosis and, and that patient passed away, um, I had said to him, I am thinking about, you know, um, you at as a, as a home health aide for myself. I said, But here's the deal with me. I like to hike. I mean, I'm not talking, walking. I like to hike. I like to hike for hours. Would you be willing to hike with me or are you just gonna sit there, put me in a pull up, you know, hore me over at eight o'clock at night and put me to bed. You know, I wanna hike. Yeah. Would you hike with me? And he said, I said, Would you hike with me until I can't?

Speaker 1 ([35:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2113.03)):

Right, Right.

Speaker 2 ([35:14](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2114.48)):

He said, I'll hike with you until you can't and then I'll carry you. Yeah, yeah, yeah.

Speaker 1 ([35:29](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2129.85)):

What So an amazing person.

Speaker 2 ([35:33](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2133.18)):

And he is in my house right now. He lives with us 120 hours a week. Um, he's got a little 48 hour shift that I still would like to fill for him. Um, and so specifically the GoFundMe, um, that is not something that Medicare covers. They would certainly send me an agency person. I'm sure they'd be fantastic, but it would be a different shift. Yeah. It might be four hours. They might do different things.

Speaker 1 ([36:00](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2160.36)):

Yeah.

Speaker 2 ([36:00](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2160.85)):

This is what I chose to do.

Speaker 1 ([36:02](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2162.21)):

That's right.

Speaker 2 ([36:03](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2163.07)):

And so I started the GoFundMe page and the response has been so encouraging. Mm-hmm. <affirmative>. Um, and that is specifically what it's for. Every penny other goes, and I'm looking to fund two tours. Um, hospice I know will revisit me after a year. You know, they'll, i'll, I'd like, so I'd like two six month tours so I know what those digits come out to. And that's the number that I'm looking to as my, that, that I said is my goal.

Speaker 1 ([36:30](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2190.52)):

Absolutely. Beautiful. Well, we will help you to reach that goal For sure. And this man is just amazing what he just shared. And I also think it's so important for people to hear you chose him, you wanted him. Um, and I think people should investigate again, their local hospices before they ever need them. Get to know them and doula givers. Get to know the doula givers in your area because then there's, you know, if you have a relationship, you know who it's gonna be. You know who you like. And there's a, there's a priceless piece of mind that comes with all of that. So ahead of time, planning ahead of time, in my opinion. And what I've seen, 80 to 90% leads to a better end of life. 80 to 90%. That is a win across the board.

Speaker 2 ([37:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2233.66)):

It is a win across the board. And it's interesting because we all, you know, know that that is important when it comes to our documents. Um, but it's still important as far as our state of mind because the bottom line is, as you know, Suzanne, the only thing we take with us is our state of mind.

Speaker 1 ([37:27](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2247.13)):

That's right. So it's no, it doesn't just apply to documents applies to the holistic model that we talked about. Yes.

Speaker 2 ([37:33](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2253.05)):

Jody,

Speaker 1 ([37:33](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2253.719)):

Jody, you are such a light. I wanna thank you and I wanna, again, help you to reach your goal, but also thank you for your gift of your being in this world and also your shares. It is tremendous. I know that it has helped so many and I can't wait to continue the journey with you.

Speaker 2 ([37:50](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2270.44)):

I am blessed not depressed.

Speaker 1 ([37:52](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2272.6)):

I love

Speaker 2 ([37:53](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2273.17)):

It. And, and I, and I'm so grateful that you and I had an opportunity to connect. Make it a great day. I'm going to,

Speaker 1 ([38:00](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2280.33)):

I'm going. And I hope all of you are going. So Jody, again, thank you so much. We'll have your information below.

Speaker 2 ([38:06](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2286.05)):

Thank you, you

Speaker 1 ([38:06](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2286.89)):

Everyone, for listening to this interview. My name's Susan O'Brien from Doula Givers and we will see you in the next interview.

Speaker 2 ([38:13](https://www.rev.com/transcript-editor/shared/o9_1CYsUtgVmRNS6RrUzfKzluUQCeD0kvjhmGdzTHsyzncspuCtvxcRXuQNjrEFeiafFBvAzAn424uAzSPpA9HWCRFs?loadFrom=DocumentDeeplink&ts=2293.46)):

Thank you.