Art Interprets Alzheimer’s
The AAWR asks the question: How can art help us to better understand Alzheimer’s disease and the emotional burden it places on loved ones?

Art Interprets Alzheimer’s

An exhibition featuring the artworks of George Roby and Herbert Ascherman

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March 30, 2012 – April 28, 2012

Opening Reception
Saturday March 30, 2012 from 5:00-8:00 pm in the AAWR gallery

Closing Reception
"Ask the Researchers"
Friday, April 27, 2012 from 5:00-7:00 pm in the AAWR gallery

Traveling Exhibition Locations

May 17 – July 8, 2012
McConnell Arts Center, Worthington, Ohio

Sept. 1 – Oct. 31, 2012
University Hospitals, Main Campus, Cleveland, Ohio

Nov. 8 – Jan. 31, 2013
Progressive Art Collection, Mayfield Village, Ohio

Case Western Reserve University School of Medicine neuroscience researcher Dr. Gary E. Landreth will present facts about Alzheimer’s disease, and doctoral candidate Paige Cramer will speak about her promising Alzheimer’s disease research that is expected to go into a proof-of-principle clinical trial early this year.

Dr. Gary E. Landreth,
Professor of Neurosciences at the Case School of Medicine will be presenting what is known about Alzheimer’s disease from a research perspective. Dr. Landreth has received a B.A. in Chemistry/Biochemistry from the University of Kansas and a Ph.D. in Neurosciences from the University of Michigan. His principal scientific interests are investigation of the biology of Alzheimer’s disease and the development of new therapeutics for AD. Over the past 20 years he has investigated the microglia-mediated inflammatory response in the AD brain. These studies represent an important intellectual focus in the lab. The recent recognition that the activation status of microglia is governed by nuclear receptors allows new therapeutic approaches that regulate microglial biology. Dr. Landreth’s work is committed to translating the studies of the basic biology of these processes into new therapeutic approaches to the disease.

Paige Cramer,
Doctoral candidate, will briefly present her promising bexarotene research that is set to go into a proof-of-principle trial early this year. Dr. Cramer graduated from Tufts University in 2006 with BS degrees in Biology and Biomedical Engineering and a minor in Classical Studies. In 2007 she began working in the Lab with Dr. Landreth. Cramer’s Alzheimer’s disease research was recently accepted by Science, the premier neuroscience journal, and will be published in early 2012. She will be presenting her research at meetings world-wide from the International Conference on Alzheimer’s Disease in Vienna, Austria to the Society for Neuroscience in San Diego, CA to the Keystone ApoE meeting in Keystone, CO.
Facing Alzheimer’s Disease
Douglas Max Utter Cleveland Artist and Freelance Writer

Because art deals with the way things fit together, it also describes how they fall apart. Artistic process is partly a matter of expression, but just as importantly develops systems whereby artists rebuild and reorder their experience of the world, sharpening and reinforcing memory. The focused attention of a camera lens or a brush or any of the gestures used to produce a work of art reconstruct connections, hooking together elements of the present tense. Often a work of art has few answers about the nature of things, but asks questions about the coherence of the world and the truthfulness of daily perception that help us to examine our own predicaments.

Contemporary art in particular often takes note of life’s ambiguities, meditating on the nature of recognition and the decay of narrative structures. It would be hard to find a subject more suitable for this ongoing aesthetic project than Alzheimer’s disease (AD), a progressive brain disorder that impacts every phase of cognition and currently affects more than five million Americans. In 2006 alone, more than 72,000 died from the ravages of AD, which now is the nation’s sixth leading cause of death. Some fifteen million unpaid caregivers, usually family members, do what they can for these victims of a condition which so far has no cure, nor any real preventive regimen.

Although the etiology of AD is still imperfectly understood, researchers have established that much of the disease’s impairment of brain function is caused by an accretion of protein fragments known as beta-amyloid plaques in the spaces between nerve cells. Adding to the confusion generated by that blockage is the incidence of “misfolding” among tau proteins, which normally stabilize microtubules (structural components of the cell) but in AD become relatively insoluble and fail to take on their functional shape. The ensuing intracellular mess causes further neural roadblocks, referred to as “tangles.”

The progression of AD has been mapped out by researchers as a journey in seven stages, but for its victims and those who love them the stops and the sights differ in every case. Ceramicist George Roby has accompanied his wife Sue through her own experiences with the disease since the onset of symptoms several years ago. Roby himself is one of Ohio’s most distinguished artists making raku and high fire ceramic sculpture. In his work significance emerges from contrasting experiences of touch and the way that textures speak to the eye. Rough and smooth, hot and cold, wet or dry – Roby’s sculptures propose relations between these things, deployed in three-dimensional space. Sometimes these seem like simple, ancient machines of a kind, locks on the compartments of the soul, or keys that fit them. Or they take on a kind of personality, suggesting both personal and sacred presence.

For his sculptures about Alzheimer’s Roby uses cues from the biochemistry of the disease, mixed with a more metaphorical, whimsical account of the way that Sue and he relate to each other, alone together in the land of AD. In “The First Signs” a long, slender cuboid strip rises from a half-sphere, which serves as a pedestal and at the same time is like a flagpole on a hill or an emblem of self, perched on a self-contained world.

At intervals the smooth surface of the clay cube is interrupted by brief anomalous passages; at the top a short tube-like piece protrudes – here is the ominous onset of an enigma. “What is said and what is heard” presents an image of miscommunication: Situated on a black, shelf-like slab, a white ball or orb has been placed next to a black cube, marked with mysterious, calligraphic signs. Or describing a phase of emotional rather than cognitive dysfunction, Roby’s “The Numbness” is an overall polished gray and consists of four slightly mismatched tubular sections, like the broken lengths of a fossil worm, writhing gradually upward, again stabilized and nurtured by a hillock-like base that might evoke the ground of a human life.

Alongside these deeply affecting symbolic accounts of AD, internationally known photographer Herbert Ascherman has contributed fifteen portrait photographs of people with AD, literally putting faces on the disease. Most of Ascherman’s subjects could easily be mistaken for reasonably content, intelligent, quite normal older persons; the disease is not as transparent as we imagine. Yet, whether it is because these smiling people with their direct gaze have been identified as victims of AD, or because the photographer has captured hints and traces of a mostly hidden abnormality, a deepening impression that something is wrong haunts Ascherman’s images.

His subjects’ hands, in some cases clasped in front of them on a table, are perhaps too stiff, their posture too rote, their gaze, after all, not so direct, but focused on some quite different reality. And despite this, in the end they tell again that particular truth which portraits always convey: these are in so many ways our own faces, ourselves, and all those we have known and loved.
Among the truly gifted serious artists with whom I have been fortunate enough to become acquainted, primarily through their productions, there usually seems to be a defined set of critical factors that combine and set the tone for a specific series or body of works.

One of these gifted artists, whom I have come to admire through his sculpture and pottery, is George Roby. Through the years, George has consistently mastered the expressive use of ceramics both through traditional contemporary pottery, and within his sculptural pieces that go beyond tradition. It is the expression of human relationships and interaction through abstraction that gives this exhibition’s sculptures a very special significance.

George has created the works in this exhibition around the daily struggle towards understanding what it means to have a loved one slowly become entrapped by Alzheimer’s disease.

The first piece in this series he has devoted to this life challenge is entitled “The First Signs”. It defines the first moment that one realizes something serious is happening. In George’s own words, “Something is interrupting the normal, more orderly flow of one’s life. Order is beginning to give way to disorder, one piece at a time. The planned life will become the unplanned life. The life of building will become the life disintegration.”

In “First Signs,” there is an unusual sense of vertical stacking of simple column-like forms, interrupted by odd segments and an awkward stubbed branch-like appendage near the top suggesting something unsure. The overall structure at first glance seems like a bathroom plunger standing in the corner waiting to be useful. But then the stoic figure appears atop a hemisphere as if frozen in time. What should we make of this?

In “Numbness,” Roby expresses how he was stunned when informed about the onset of Alzheimer’s within his wife Sue. He recalls walking into his studio and seeing a rolled tubular gray clay form that overwhelmed him with a numbing effect.

Personally, I find it interesting that the majority of artists with whom I am familiar embrace abstraction as a form through which to express themselves. These artists intentionally take on challenges of communicating through a made-up visual language. Artists that work in abstraction continually face the uncertainty of communicating metaphorically rather than directly. While directly dealing with the trauma of this new dimension in their lives together, George and Sue have labeled themselves “The Handler” (George’s idea) and Sue, “The Happy Nuisance” (Sue’s idea). These labels are used on occasion, especially when Sue reminds George of who is who.

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In “Sue and Me,” there are two figures carefully perched on a large mound as if protecting each other and their territory from a possible mishap. These figures stand together, close and supportive. The taller figure is more stable at its bottom and shielding at the top. The other figure is precariously set but still close. The warm tones of the cross hatched-clay mound present a temporary stability to the hovering figures.

In “What is Said and What is Heard,” there is the obvious contrast of a large, box-like object with somewhat calligraphic gestures on the surface juxtaposed with a smaller spherical form. This suggests how different each form is and what it might express in relation to the other. A communication between these forms might suggest a difference in understanding of what is said and what is heard by both. Not just the “Men are from Mars”... and you know the rest.

In “The Tau,” Roby has expressed a more chaotic cluster of shapes and motions with contrasting colors, suggesting the momentous changes that happen when a healthy brain cell, once formed straight and of a certain order, slowly starts to lose its alignment and become undone. The interlocking and opposing horseshoe or magnet-like shapes push and pull in all directions, and the contrast of red and white are almost electric in their presence. The turmoil of this piece is dynamic.

Rather than my commenting on every one of these poetic works of art, I have focused on a few to bring a heightened awareness between the artist’s intents and the power of these forms.

As a father of a profoundly developmentally disabled son, I have over his 43 years sought out many forms of communication with him and continue to sense his needs as he struggles to nonverbally interact with others. Unlike with Alzheimer’s disease, my Matthew has maintained his somewhat limited abilities, and in very small ways has continued to grow and enjoy the life he has. Alzheimer’s causes a regression, reversing the learning and growth that most of us experience every day of our lives. Facing this together as George and Sue take on one day at a time is their personal challenge. All of their friends and family are affected by this journey. Sharing their struggle through this wonderfully personal collection of sculptural bookmarks in time allows all of us to delve deeply into the art of communication through this moving and heartfelt personal visual dialogue.

“Everyday of our lives is a gift. Sometimes we would like to return a gift because it was not what we were hoping to receive. I am confident that most people can relate to that urge now and then, but just as we have learned from our everyday experiences, those who accept and truly appreciate the fact that they have been given a gift, the overwhelming response is to then give back, not take back or exchange. This exhibition is a gift to all of us.”

Biography

George Roby, Archived Artist, is a respected Ohio potter, sculptor, and teacher. His work includes large, expressive slab and coil built sculptures that are suitable for indoor or outdoor exhibit.

George also produces functional stoneware using both hand-built and wheel-thrown techniques. George uses special oxides and glazing techniques that augment the characteristics of electric firing, resulting in striking surfaces and colors that coincide with his well conceived forms.

George Roby has become well known through juried exhibitions such as the Cleveland May Show, Butler Sculpture and Ceramics exhibit, Ohio Designer Craftsmen and many other regional and national exhibits.
All statements are by the artist

George Roby Sculpture

How’s It Going?
Clay, Acrylic Paint, 28” x 13” x 13” 2011
In the areas of research and support programs, so often an idea or hypothesis looks promising in the beginning only to prove ineffective, problematic, going nowhere. It simply falls apart. But, sometimes, from the disappointing heap arises one lone, new idea.

The Numbness
Clay, Acrylic Paint, 47” x 13” x 13” 2010
Sometimes the caregiver looks at the one with Alzheimer’s, sometimes one has just been told he has Alzheimer’s. Each can experience that feeling of numbness, emptiness, nada. There is little sensation of form or color, the emotion is flat. The idea for this piece came when I walked through the studio and saw this long piece of clay lying on the bench and I felt numb.

The Comfort of Acceptance, the Pain of Denial
Clay, Acrylic Paint, 18” x 12” x 12” 2011
This piece was initiated after seeing the pain, the hard feelings and the inability to move forward when there is denial by either the person or family. Friends and family struggle to respond or help or even communicate. Acceptance and openness allow for communication, planning and a degree of normalcy. Acceptance enables all to “deal with it”. Acceptance is the warm, open bowl form surmounting the darker, enclosed form.
The Constant Subtle Shifting Shades of Gray
Clay, Acrylic Paint, 53” x 17” x 17” 2011
In research there are often nuanced, hard to discern changes that demand close attention. In the experience of living with Alzheimer’s disease, there are continuous shifts of very subtle behaviors, thoughts and feelings that give the sensation of “Did I just see what I thought I saw?” “Will it happen again?” “Maybe I imagined it.” “What caused it?” “Does it mean anything?”

Some important aspects of Alzheimer’s, the causes as well as the behaviors, seem to be very inconspicuous, very subtle.

No Two Stories Are the Same, or Are They?
Clay, Acrylic Paint, 66” x 18” x 18” 2011
In detail no two stories of the Alzheimer’s experience look alike. In general, the various stories, experiences and feelings often follow the same path. There is the same steady march, with varying detours, to the end. The feelings at the end are so often of emptiness and impotence and loss.

The Amyloid Tango
Clay, Acrylic Paint, 40” x 18” x 18” 2010
Is it the amyloid tangle or the amyloid tango? In the brain cells, these tiny protein particles seem to be performing a kind of dance, sometimes in clumps, sometimes in tangles, sometimes moving, sometimes still. Are they lively, maybe deadly?

Is it the amyloid tangle or the amyloid tango? In the brain cells, these tiny protein particles seem to be performing a kind of dance, sometimes in clumps, sometimes in tangles, sometimes moving, sometimes still. Are they lively, maybe deadly?
The Tau
Clay, Acrylic Paint, 28” x 17” x 17” 2010
The tau is another protein particle found in the brain cells. In the healthy brain cell it is straight and in an orderly arrangement. In the diseased cell it has begun to change shape, lose its alignment and eventually die off. This impairs the function of the brain even further. It is a tiny silent killer.

We All Forget Sometimes. Yes, But It’s Not the Same!
Clay, Acrylic Paint, 61” x 18” x 12” 2011
This piece is based on a number of repeated experiences that, like the sculpture itself, are awkward and uncomfortable, sometimes difficult to interpret. Somehow, hearing “we all forget sometimes” seems demeaning, denying the fate and aloneness of Alzheimer’s disease. On the other hand it may be one’s response when a person doesn’t know what else to say. In any case, this piece depicts the idea of something going in one ear and out the other (either something said or a thought). It is not captured and stored by the brain. It is not a pleasant situation.

What Is Said and What Is Heard
Clay, Acrylic Paint, 8” x 9” x 15” 2011
Unless we learn to listen openly and truly, what is said, especially by the one with Alzheimer’s, will fail to communicate anything. Thoughts will be severely filtered and altered. It also matters how the caregiver speaks to his partner. Is the voice soft and subtle or loud and sharp? How is it said and how is it heard?
This Is Your Brain on Alzheimer's
Clay, Acrylic Paint, 7” x 6” x 6” 2011
I think this is pretty obvious.

Sue and Me
or – The Handler and the Happy Nuisance
Clay, Acrylic Paint, 23” x 13” x 17” 2011
For the alternate title, we were at a loss as to how to label ourselves, and still are. “The Handler” was my idea and later Sue came up with “The Happy Nuisance”. She uses it on occasion when reminding me of who is who. In any case, this piece suggests several things – that we stand together through this journey and that one of us provides protection and love and support for the other. For the one with Alzheimer’s there is the loss of brain mass and brain function and for the other there is the need to rise to the demands of the job. The color suggest the warmth and aliveness that is so important to make it all work.

You Gotta Reach Out
Clay, Acrylic Paint, 47” x 19” x 19” 2011
This advice has many applications – research, caregiving, seeking knowledge, funding, building community support, the quality of life for the one with Alzheimer’s. Sometimes reaching out may have to be done over and over and in very different forms. Some beginnings are tentative and uncertain but reaching out and making connections are very effective means of problem solving and Alzheimer’s is a big problem. As difficult as it may be, you have to fight off the “I can do it myself” attitude.

The First Signs
Clay, Acrylic Paint, 43” x 20” x 20” 2010
This was the first piece in the series and defines the first moment one realizes something serious is happening. Something is interrupting the normal, more orderly, flow of one’s life. Order is beginning to give way to disorder, one piece at a time. The planned life will become the unplanned life. The life of building will become the life of disintegration.
“Photographers,” wrote Henri Cartier-Bresson, “deal in things that are continually vanishing, and when they have vanished there is no contrivance on earth which can make them come back again.” Each click of the shutter preserves a single, unique instant in time and separates it from all past and future moments. This aspect of the photographic process parallels the experience of the individual with Alzheimer’s, a disease that disrupts the flow of time and leaves behind a tangle of disparate moments. It seems entirely fitting that the AAWR invited the supremely gifted portraitist Herbert Ascherman to interpret the disease’s impact through photography.

This task was challenging. Portraits are more than literal recordings of likeness at a certain moment in time. A great portrait reveals the sitter’s past and suggests his future. It depicts the individual as he is and alludes to how he wants to be seen. Communication between photographer and subject is essential; portraits are collaborations. Yet people with Alzheimer’s may have a fleeting or permanent loss of spatial or temporal awareness of themselves or their surroundings, limiting the amount of exchange between photographer and subject.

Ascherman photographed 15 people at different stages of the disease, ranging from those who show no effects to some who are severely debilitated. He had them come to his studio and used an 8 x 10 inch view camera, a large instrument that slows down the process of picture taking, imposes a certain formality on the process, and produces exquisitely detailed images. Ascherman’s decision to shoot in black-and-white distances the images from the vivid reality of our everyday life.

Each portrait except that of Jan Dyer, who poses with his dog, shows the subject seated at a table and framed so they are seen half-length. This intimate distance makes it seem as if we are sitting opposite them at the table. All the views are frontal, yet only four of the sitters look directly at the lens; the rest avoid the camera’s eye. Studio equipment is visible in several of the shots, partly because some of the sitters were unable to remain entirely still as a consequence of symptoms of the disease. But Ascherman’s adjustments of angle and looser framing not only follow the sitters’ movements but also give us a behind-the-scenes glimpse of the process. He further underlines the directness and unvarnished truthfulness of the images by including the edge of the film holders in the prints, revealing that each image has been printed full frame.

The neutral, controlled studio setting provides no clues about the sitters’ personal tastes, social or economic status or biography. We learn about them solely through facial expression, body language, gaze and sense of presence – direct as opposed to secondary evidence. Most of them smile, as we all have been taught to do so for the camera. Disorientation and detachment are discernable in a few faces, but even in those images, Ascherman conveys the individuals’ personality and humanity. He also shot each sitter with his or her caregiver, intended as a thank-you gift for the caregivers’ assistance in the project. Those double portraits also afford additional insights into each subject’s personal life and degree of interaction with the outside world.

As Alzheimer’s disease progresses, those afflicted with it are increasingly closed off from our world. The roots of the word “portrait” are Latin words meaning to draw forth. Ascherman’s photographs respectfully and subtly draw forth the souls of these 15 people. His prints are a lasting record of a moment in which two human beings – the photographer and the sitter – made contact and communicated. They are, as Elizabeth Barrett Browning described photographic portraits, “the very shadow of the person lying there fixed forever.”

Barbara Tannenbaum, Curator of Photography
Cleveland Museum of Art

The Very Shadow of the Person Fixed Forever
I was drawn into the Art Interprets Alzheimer’s exhibition because the director of the AAWR wanted to add a visual element to the three-dimensional work of sculptor George Roby. George’s wife Sue has Alzheimer’s. As a psychological vehicle to experience and understand her changing behavior, he began a series of sculpture which mirror both of their thoughts and emotions (and do it quite well, I might add). AAWR Director Ken Goerg invited me to contribute a visual interpretation of the disease, centering on my portrait skills and interests.

After a great deal of thought as to the direction of my contribution, I decided that the best way to convey an internal state is through external analysis.

I am a portrait photographer. I take portraits. Portraiture is a means of communication between the subject, myself the photographer and the third person viewer. A portrait is an individual photograph (or in the case of the Stieglitz/O’Keeffe masterpieces) a collective body of work that visualizes simultaneously who the person is, who they think they are, who they want to be (in front of the camera), how the camera, film and lighting affect them, and most importantly, how they respond to the photographer.

The challenge with Alzheimer’s patients is that there is an essential breakdown in the above sequence of criteria. They may or may not have a spatial or temporal awareness of themselves or their surroundings, however fleeting. The people I photographed ranged from the mildest introductory cases to the most severely debilitated. As a consequence, the essential element of a portrait, that of communication between photographer and the sitter, ranged from nonchalance to totally impossible. In essence, these pictures reflect the degree of communication the Alzheimer’s patient has with the outside world: a possible physical understanding of the here and now, with no elemental frame of reference. Do the portraits belie this fact? Hard to tell. Some do, others, to the casual viewer, may not.

What I found absolutely fascinating was the position of the sitter in front of the camera. I am working with an 8 x 10 Deardorff which, once focused, is loaded and the shutter tripped. Most subjects moved in that second or two of the film being loaded, dark slide removed and exposure taken. I made slight camera adjustments attempting to follow them, which accounts for the background creeping into many of the portraits.

Upon seeing the proofs, I recalled telling each person to ‘sit down and put your hands on the table’…Which they did, literally. Not folding their hands, or delicately placing their hands, but more than half simply placed their hands flat on the table and left them there for the 10 or so minutes I worked. Once I saw the emerging pattern on the proofs, I was stunned by the literalness with which they took my request, and the fact that did, did not seem to be individually processed by the sitter. (I shot about 4 to 6 photos of each person, and a one-shot portrait of each of them with their caregiver as a thank-you gift for their participation. These shots will be mounted next to the framed 16 x 20 enlargement of the sitter.) Most had pleasant expressions at the urging of their caretaker, several stared blankly into the camera, totally unaware of the experience we were sharing. A few responded with a smile.

As a single body of work, these 15 portraits and their accompanying family shots convey a brief look at both the interior and exterior of a horribly debilitating experience.

– Herb Ascherman

Biography

Herbert Ascherman, Board President, began his service on the AAWR’s board in 2009. A fourth-generation Clevelander, he is considered by many as one of this nation’s foremost living portrait photographers. Herb has been creating fine art and professional portraiture for more than 36 years, specializing in black and white and the resurgent art of platinum photography.

Internationally recognized for his photographs of people in creative, commercial, and social settings, Herb’s work has been exhibited and commercially published throughout the U.S., Europe, Japan and India. He has taught for over 30 years, appeared on numerous television and radio programs, and published three books on portraiture.
Herbert Ascherman Photography

Alex Carlino
16" x 20", matted 18 3/4" x 22 1/2"

Herbert Ascherman
Photography

Vernon Kramer
16" x 20", matted 18 3/4" x 22 1/2"

Dorothy Kusold & Alex Carlino
8" x 10", matted 13.5" x 15.5"

Alex Carlino
16" x 20", matted 18 3/4" x 22 1/2"

Vernon Kramer
16" x 20", matted 18 3/4" x 22 1/2"

Mary Lou & Vernon Kramer
8" x 10", matted 13.5" x 15.5"
Betty Penosa
16" x 20", matted 18 3/4" x 22 1/2"

Chris Krysiak & Betty Penosa
8" x 10", matted 13.5" x 15.5"

David Brown
16" x 20", matted 18 3/4" x 22 1/2"

David & Mrs. Brown
8" x 10", matted 13.5" x 15.5"
Mary Jones
16" x 20", matted 18 3/4" x 22 1/2"

Kathleen Jeavons
16" x 20", matted 18 3/4" x 22 1/2"

Jerry & Mary Jones
8" x 10", matted 13.5" x 15.5"

Norman & Kathleen Jeavons
8" x 10", matted 13.5" x 15.5"
Patti Gerrard
16" x 20", matted 18 3/4" x 22 1/2"

Rick Loscei
16" x 20", matted 18 3/4" x 22 1/2"
Richard McCafferty
16” x 20”, matted 18 3/4” x 22 1/2"

Maura & Richard McCafferty
8” x 10”, matted 13.5” x 15.5”

Frances & Seth Taft
8” x 10”, matted 13.5” x 15.5”

Seth Taft
16” x 20”, matted 18 3/4” x 22 1/2”
George and Sue Roby
8" x 10", matted 13.5" x 15.5"

Sue Roby
16" x 20", matted 18 3/4" x 22 1/2"

Brigid & Tom O’Malley
8" x 10", matted 13.5" x 15.5"

Tom O’Malley
16" x 20", matted 18 3/4" x 22 1/2"
Lord Have Mercy
by Tanjulla Tyson
(Caregiver)

As my mother lay in her bed at night, she can often be heard asking the Lord to have mercy. These words come through crystal clear amongst other words that are no longer comprehensible.

As her daughter, caregiver, and advocate it brings me pleasure to hear her voice again. In those moments, I understand the Lord is the focus and not the disease.

I want the world to know Alzheimer’s disease will devastate families,
I want the world to know African American families are under-represented,
I want the world to know younger caregivers are under-represented,
I want the world to know Alzheimer’s disease changed my life’s purpose,
I want the world to know I pray for more research, education, outreach, and a cure,
I want the world to know Alzheimer’s disease couldn’t touch my mother’s Holy Spirit,
I want the world to know my mother can’t remember or talk clearly anymore,
But she still remembers to talk to GOD.
by Alzheimer’s Patients and Caregivers

Debbie & Jan Dyer:
“People should know that even though a person has been changed by Alzheimer’s, the essence and soul of the person doesn’t go away no matter how far the disease progresses.”

Patti Gerard:
“People should know that Alzheimer’s disease could strike anyone at any age. It can hit you in the prime of your life. The disease does not just affect older people. I was 55 when I was diagnosed. We need to support more research and find a cure in my lifetime.”

Rick Locsei:
“People should know that it’s very frustrating. The memory is just not there, you might have something in your mind one second and then it is gone. It is what it is. With Alzheimer’s, life throws you curves and you can do a couple things; you can give up or fight it. I am always thinking about this because it has impacted me.”

My Brother, Richard McCafferty

Alzheimer’s is a cruel disease. I know because my brother suffers from it. It is cruel to the person who has it. It is cruel to those who love the person. It is cruel to all who are touched by it.

With 5.4 million Americans suffering from Alzheimer’s, it is a pervasive cruelty, touching almost every American.

I know that it is cruel to my brother’s wife. I know my sister-in-law did not envision the present situation as their retirement years. Forty years of marriage – and only her deep and passionate love keeps her going in her daily care of her husband.

I know that it is cruel to my niece, my brother’s daughter. Just as she entered her adulthood and could form a mature and loving friendship with her dad, he began slipping away.

I know that it is cruel to my family. My sister and I have watched our brother slowly slip away, losing the gentle, kind and funny brother who gave us such joy and support.

I know that it is cruel to my brother whose brain is changing, whose mind is losing its powers to think and remember.

But in the midst of this cruel disease, we still see signs of our husband and father and brother. We see his gentleness, his kindness, his sense of humor. He entertains us with an Irish jig to McNamara’s band. His favorite expressions are “I love you,” and “Thank you.” He sang “Silent Night” with us at Christmas and can still pray the “Our Father.”

I know that any advances in conquering this disease will not change my brother’s condition… and that is cruel. But I pray that a cure will be found to end this cruel disease.

– Sr. Kathleen McCafferty, SND
February 11, 2012
Alzheimer’s Disease Facts

This innovative show will not only showcase the works of talented Archived Artists George Roby and Herbert Ascherman, but will also promote awareness of Alzheimer’s disease, the research for a cure, and its effects not only on the patients but on the caregivers and the community as well. Art can evoke a range of emotions in the viewer and the AAWR hopes this exhibition will relay the emotional impact of the disease.

What is Alzheimer’s disease?
Alzheimer’s disease is a type of dementia that affects memory, thinking, and behavior. It is a debilitating disease that progressively worsens over time. In the early stages mild memory loss occurs but in the later stages individuals lose the ability to carry on a conversation and respond to their environment. After symptoms are discovered, people can live an average of eight years. Survival can range from four to twenty years depending on age and health conditions.

Is there a cure?
There is currently no cure for Alzheimer’s disease, but research for a cure continues. The symptoms of Alzheimer’s can be treated, and such treatments can slow the worsening of dementia and improve quality of life.

Who does it affect?
Alzheimer’s disease is the sixth leading cause of death in the United States. By 2011, 5.4 million Americans were known to have Alzheimer’s disease. By 2050, 16 million Americans are expected to have the disease. There are nearly 15 million care givers providing 17 billion hours of unpaid care who also suffer emotionally and physically from the effects of Alzheimer’s. While the majority of people with Alzheimer’s are 65 and older, it does affect younger people. Up to 5% of people with Alzheimer’s have early-onset Alzheimer’s that can appear in one’s 40s or 50s.

What are the signs?
The Alzheimer’s Association gives ten warning signs of the disease:
• Memory loss that affects daily life. While memory loss is a normal part of aging, people with Alzheimer’s disease forget recently learned information, important dates or events, or ask for the same information over and over.
2. Changes in ability to develop and follow a plan or work with numbers.
3. Difficulty completing familiar tasks such as driving to a familiar location, remembering the rules of a favorite game, or managing a budget at work.
• Confusion with time or place.
• Trouble understanding visual images and spatial relationships.
• Misplacing things and inability to retrace steps.
• New problems with words in speaking or writing.
• Decreased or poor judgment.
• Withdrawal from work or social activities.
• Changes in mood or personality.

The Costs of Alzheimer’s:
• In 2010, Alzheimer’s and other dementias cost Americans (families, insurers, and the government) $172 billion.
• In 2050, those costs will increase to over $1 trillion (not including inflation).
• Over the next 40 years, Alzheimer’s will cost America over $20 trillion, enough to pay off the national debt and still send a $20,000 check to every man, woman and child in America.
• The federal government currently spends much less money on Alzheimer’s research, prevention and a cure than on other conditions such as cancer, heart disease and HIV - $6 billion for cancer, $4 billion for heart disease, $3 billion for HIV/AIDS. But just $480 million for Alzheimer’s disease.
Their mission:
To eliminate Alzheimer’s disease through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health.

They provide a number of services and programs:
A 24/7 Helpline, educational services, online caregiver coaching, care consultation, respite reimbursement, early-stage services, caregiver support groups, enrichment programs, Medic Alert+Safe Return ID program, web-based GP/S location management service.

| www.alz.org/cleveland |

Basics of Alzheimer’s Disease
Alzheimer’s is a disease of the brain that causes problems with memory, thinking, behavior and is not a normal part of aging.

It gets progressively worse over time. The symptoms can vary widely, though the first problem many people notice is severe forgetfulness that affects a person’s ability to function at home, work, and enjoy lifelong hobbies.

Alzheimer’s Disease is the 6th leading cause of death and is the only disease among the top 10 leading causes of death in America that cannot yet be prevented, cured or slowed down. An estimated 5.4 million Americans have Alzheimer’s disease. Thirteen percent of those are over age 65 and close to 50% are 85 and older. By 2050 the number of people with Alzheimer’s may reach 16 million. Every 69 seconds someone in America will develop Alzheimer’s. This disease’s impact extends to the millions of family members, friends, and caretakers caring for these individuals.

Risk factors
Age, family history, genetics.

Treating Alzheimer’s
There is no cure but there are a number of drugs and non drug treatments that can help both cognitive and behavioral symptoms.

Stages of Alzheimer’s
• No impairment
• Very mild decline. This may be normal age related changes or early signs of Alzheimer’s.
• Mild cognitive decline. This stage may be diagnosed in some individuals but not all.
• Moderate cognitive decline. This is mild or early stage Alzheimer’s. At this point a medical interview should be able to detect clear problems in several areas.
• Moderately severe cognitive decline. Moderate or mid-stage Alzheimer’s with gaps in memory and thinking becoming noticeable.
• Severe cognitive decline. Memory continues to worsen, personality changes, needing significant help with daily activities.
• Very severe cognitive decline. Severe or late stage Alzheimer’s. Individuals lose the ability to respond to the environment, carry on a conversation, control movement.
Thank You

The Artists Archives of the Western Reserve would like to thank the following contributors for supporting the production of this catalog and the development of the Art Interprets Alzheimer’s exhibition.

- The Zufall Family Foundation
- The Alice Fund of the Alzheimer’s Association
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- Kristina Markovic, AAWR Intern
- Cheryl Kanetsky, for her collaboration in promoting this exhibition.
- Robin Blass, for assisting in the development of the Ask the Researchers forum.
- Jeffrey Katzin, for the production of the exhibition promotional video.
- Rota Sackerlotzky as a consultant
Acknowledgements

The Artists Archives of the Western Reserve is proud to present this unique and compelling exhibition, Art Interprets Alzheimer’s. AAWR staff developed this exhibition as an insightful glimpse into the world of Alzheimer’s from the perspective of two distinguished artists, and also an opportunity to enlighten the public about a condition that is often shrouded in mystery. We especially wanted to recognize the importance of the role of the volunteer caregiver. It has been said that art mirrors the human condition, and this exhibition visually describes a subject that is simultaneously complex, disturbing, and hopeful.

We would like to thank Cheryl Kanetsky and the Alzheimer’s Association Greater Cleveland Chapter for their support in the planning and promotion of this exhibition. We also appreciate Robin Blass’ efforts that resulted in the special closing reception event, Ask the Researchers.

We thank the numerous contributors to this exhibition and catalog. We gratefully acknowledge the Zufall Foundation, the Alzheimer’s Association and its Alice Fund, and Gail and Michael Sands for their generous contributions. Alice Sands was a Cleveland artist who suffered from the disease until her death in 2006 at age 91.

A list of acknowledgements would be incomplete without thanking George Roby and Herbert Ascherman. Their original art, created especially for this exhibition, is an extraordinary contribution. We also appreciate that they contributed so much in the planning of the exhibition.

It is our hope that Art Interprets Alzheimer’s will get people to think about art as it relates to the disease. The exhibition examines Alzheimer’s and visual art from the perspectives of the caregiver, the scientist, and the artist. A worthy topic for future study is visual art as a research tool. The work of several contemporary painters with Alzheimer’s, including that of William Utermohlen, provides clues that visual art may be useful in understanding some aspects of the disease. Transitions in spatial relationships, the use of color, line definition, etc. may in the future shed light on the progression of the disease. Today, the Artists Archives of the Western Reserve is pleased to be among those at the forefront in exploring the interaction of art with Alzheimer’s.

– Kenneth R. Goerg, Executive Director
About the Archives

The Artists Archives of the Western Reserve (AAWR) was founded by noted Cleveland sculptor David E. Davis who, along with other prominent local artists, felt that it was important to preserve this region’s unique visual artistic heritage. They believed it was vital that Ohio artists have a facility in which to permanently place their art – somewhere where the region’s art would be conserved. They wanted to create a “living archive” – A facility where archived work would be preserved and presented for public viewing.

Bernice and David E. Davis made a major donation that provided for the construction of a new facility in Cleveland’s premier cultural district, University Circle, on East 123rd Street. An art conservation and exhibition facility, the Artists Archives has a 1,100 square foot art gallery and several thousand square feet of art storage space. The Archive’s focus on preserving the work of Ohio artists gives it a unique niche in Cleveland’s art community.

The AAWR is home to thousands of artworks created by regional artists. Art is kept in a controlled environment that offers protection from fire, humidity, extremes in light and temperature, theft, and mishandling. The AAWR’s Peer Review and Recruitment Committee identifies Archived Artist candidates and reviews their qualifications. Comprised of professional artists, art historians, and art educators, this committee considers such factors as exhibition history, education, quality of work, and professional reputation when considering whether or not to grant archived status to an artist candidate. Today the Artists Archives of the Western Reserve has 59 Archived Artists, many of whom have national and international reputations. By storing and exhibiting artists’ works, developing publications and taking oral histories, the AAWR records the details of each artist’s life and career, including the approaches taken to their art, exhibition history, influences of teachers and mentors, and relationships with other artists. The AAWR’s goal is to preserve and make available this unique collection of visual, oral, and written information for current and future generations to study and enjoy.

Each year the Artists Archives also conducts several art exhibitions featuring the artwork of its Archived Artists. All exhibitions are free and open to the public. In addition to serving the needs of Archived Artists, the AAWR reaches out to all artists in the community. The AAWR invites artists and art patrons to become members. The Artists Archives works to provide member artists with exhibition opportunities as well as marketing assistance in the form of email blasts, press releases, and exposure in the agency’s publications. The AAWR produces groundbreaking exhibitions with socially conscious themes that are meant to inform and educate.

Gallery hours are Wednesday through Friday from 10:00 am to 4:00 pm and Saturday from 12:00 pm to 4:00 pm.

The AAWR has numerous pieces of the archived collection exhibited in corporate locations such as Corporate College East and BioEnterprise. At these locations over 100,000 visitors annually view and appreciate the art. For special exhibitions the Artists Archives has traveled exhibitions to venues such as the Butler Institute, Cleveland City Hall, Progressive Art Collection and others.

Mission

The Artists Archives of the Western Reserve is a unique archival facility that preserves representative bodies of work created by Ohio visual artists and, through ongoing research, exhibition and educational programs, actively documents and promotes this cultural heritage for the benefit of the public.
The AAWR works to preserve the life accomplishments of Ohio visual artists.

archived artists

Margaret Arthur
Herbert Ascherman
Lawrence Baker
Harriet Moore Ballard
Ruth Bercaw
June Bonner
Ginna Brand
Marita Burger
Samuel Butnik
Shirley Aley Campbell
John Clague
Elaine Albers Cohen
David E. Davis
Bonnie Dolin
Wayne Draznin
Mary Lou Ferbert
Barbara Gillette
Morton Grossman
David Haberman
Lee Heinen
William Martin Jean
Robert Jergens
Jennie Jones
Ron Joranko
David Kaplan
Kestutis Kizevicius
Suzan Kraus
Mark Krieger
Mario Kujawski
Charlotte Lees
Michelangelo Lovelace

Adele Marihatt
Joseph McCullough
Kathleen McKenna
Bea Mitchell
Gail Newman
Algesa O’Sickey
Joseph O’Sickey
Pat Zinsmeister Parker
Gloria Plevin
Sidney Rheuban
Ingeborg Richter
George Roby
Thomas Roese
Anita Rogoff
Charles Sallée
Phyllis E. Seltzer
Newson Shewitz
Phyllis Sloane
Marvin Smith
Jean Sommer
Marsha Sweet
Randall Tiedman
Kathleen Totter
Nancy Underhill
Douglas Max Utter
William Ward
Evelyn Svec Ward
Roger Welchans