

CAREGIVERS: HOW TO LOOK AT YOURSELF FIRST

Change Has to Come From Within The Person First

- Educate yourself: gain acceptance of the disease or disorder.
- The person you are caring for is an adult person inside a sick being.
- Have confidence in yourself, because you have never cared for anyone before. Take the approach, if it works it must be right.
- All caregiving should be in the best interest of the patient.

Approach

- You are drawn into sea of emotions including change, shock, denial, anger, loss, fear, guilt, loneliness, lack of confidence, sense of abandonment.
- Acknowledge and deal with all emotions separately (these emotions inhibit action sometimes).
- Contradictory feelings: how do you mesh all the tasks and how do you set priorities?
- Thoughts you might have - (wishing the person would die).

Evaluation - Take some time to think about the following:

1. What is the history of your relationship with the sick relative or friend?
 - Was it a loving, stormy, long distance, alienated relationship?
 - You may find that you are in a decision-making role, but you have no relationship with relative.
2. What promises have you made?
 - How much do you have to live up to promise of "till death do us part"?
 - Have you promised a relative that you would never put them in a nursing home?
3. How independent has the person been?
 - Will you need to provide guidance or support?
 - You should try to involve the patient in decisions.
4. What were role definitions, traditions?
 - How did the family relate to good and bad situations.
 - Look at how related in past, but reach out to accept responsibility in the future.
5. What is your new role?
 - What are the extra burdens you will now have?
 - Assign priorities (changes should be expected).
6. What is a good caregiver?
 - Set out to do everything to accommodate patient needs (need to consider your own needs).
 - Be a good consumer -help yourself feel confident about decisions.
7. What are your self-issues?
 - Loss of friendships could occur.
 - You might need to access traditional support groups or churches.
 - Philosophical or religious decisions may need to be addressed.
 - How is your physical and emotional well being?
 - Seeking help -who will you share private matters with?
 - Someone else is doing what I have done.
 - Get education on available community resources.

How can we become positive caregivers?

1. Accept the reality of change (find courage and strength)
2. Look at intact functions of patient -maximize the best in the sick individual.
3. Need to be aggressive -take control.
 - Don't wait around for something to happen.
 - Determine nature of caregiver's life and patient's life.
4. Bring all players (family members) together.
 - Planning conferences: schedule a meeting with all involved, including relatives who live out of town.
 - Arrive at consensus on who will be responsible for certain tasks.
 - Outside facilitator: ministers, social workers might be invited.
 - Define needs and abilities of caregivers.
 - Make a list of tasks to be done: better chance for accomplishment.
 - Discuss the merits of each idea of the survival plan.

How can we become positive caregivers? (continued)

5. Discuss how to initiate, facilitate and utilize traditional support structure including family and friends.
6. Investigate resources: spend funds to get most from investment.
7. Keep good communication a priority. With changes you will have to re-evaluate the plan.
8. Look into legal, financial and death related matters.
 - living trusts
 - wills
 - Medicaid law
 - dying laws
 - New York State "do not resuscitate law"
 - Health Care Proxy
 - autopsy
 - funeral arrangements (does the individual have a cemetery plot?)
9. Get some education -what might come next?
10. Physical exercise -maintain routines or start new activities.
11. Join a support group.
12. Set aside time to be with friends who are supportive and have a positive influence.
13. Make a realistic schedule:
 - use a written schedule
 - at the end of the day, make a list of what was done
 - Keep daily log of patient activities to develop questions about patients' moods. Find patterns that you can build on.
14. Compliment yourself.
15. Define what can and cannot be changed. Don't spend mental energy wishing for the unrealistic.
16. Reward yourself and acknowledge that you are a "steward of life".