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Services are free

- Counseling - there are no co-pays to see an EAP counselor
- Referrals - toll-free number answered live 24 hours/day, 365 days/year
- Legal Referrals - initial consultation with an attorney at no cost
- Financial Referrals - initial consultation with a financial counselor at no cost

Services are confidential

- Your information will not be released to your employer
- Services are not tied to your insurance

Services are flexible

- You or your family members can call for help
- Offices throughout United States and Canada
- Face-to-face, telephone, or online connections are available

Services are professional

- EAP counselors are licensed in the State they practice
- Counselors have a Master's degree in Social Work, Professional Counseling, or a Ph.D. in Psychology

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800-624-5544 or 816-237-2352

CARING FOR AGING PARENTS OR LOVED ONES

PRESENTED BY NEW DIRECTIONS BEHAVIORAL HEALTH

AGING TRENDS AND CAREGIVING

- ◆ In the past 20 years, the older population of the United States has grown twice as quickly as all other age groups.
- ◆ The fastest growing group is the 85 and older age group. It is expected to be seven times its present size by the year 2050.
- ◆ The elderly account for nearly one-third of the total of national health expenditures.
- ◆ Caregiving will be more difficult to provide in the future due to increasing life expectancy; a decrease in the birth rate; and an increase in the participation of women in the labor force.
- ◆ Despite the availability of formal services, informal caregiving provides for the majority of long-term care to older adults.
- ◆ Family members provide 80% of care for older adults.
- ◆ In general, caregivers tend to be women.
- ◆ Adult children caring for a parent tend to be married women with families of their own, approximately 40-59 years of age.
- ◆ The majority of caregivers have been providing care for 1-4 years.
- ◆ There are more than 76 million “baby boomers” in the United States, many of whom are entering the “sandwich generation.”

QUIZ ON DEPRESSION IN LATER LIFE (True/False)

1. It is normal for older people to feel depressed a good part of the time.
2. Memory problems may be a sign of depression.
3. Depression is easy to recognize in an older person who is physically ill.
4. Older people are more likely than younger people to say, "I am depressed."
5. A complete medical evaluation is needed to rule out physical reasons for depression.
6. Family and friends can usually help the depressed older person by telling him or her to "look on the bright side" or "count your blessings."

STRESS AND BURNOUT

This is an incredibly important topic that all caregivers must be aware of. Burnout can be dangerous to you and the loved you care for. Burnout can be very damaging and it is quite common amongst caregivers. Burnout can result from the combination of effects from one's emotional feelings of guilt, lack of recognition, helplessness, family discord and isolation and much more.

Mixed with the demands upon your own strength, your resources, time and energy it is easy to understand why so many caregivers experience this sense of utter depletion. Burnout affects your health, motivation, attitude and mood. It can flow over into your personal life as well, especially if you are not conscious as it happens to you.

CAUSES OF BURNOUT

The need to work hard	Perfectionism and high expectation of yourself and others
Commitment, dedication	Not being able to delegate responsibility to other.
The need to prove yourself	Pushing yourself past your limitations
The need for approval from others	Not reaching out for support and help
Inability to say no	Not being able to receive
Self-sacrifice	Not having a social life, not living your own life fully.

SYMPTOMS OF BURNOUT

Lack of motivation	Complaining about the caregiving role
Lack of efficiency	Depression, anxiety and emotional exhaustion
Insomnia	Sense of being overwhelmed or burdened
Headaches	Loss of self-confidence, self-esteem
Backaches	Inability to concentrate and slowed thought
Lethargy	Feelings of emptiness and sadness
Fatigue	Gastrointestinal symptoms
Anger	Frustration and easily aroused irritation
Pessimism	Cardiovascular problems
Resentment	Skin conditions

CAREGIVER BURNOUT

The following are symptoms of caregiver burnout:

- Feelings of depression.
- A sense of ongoing and constant fatigue.
- Decreasing interest in work.
- Decrease in work production.
- Withdrawal from social contacts.
- Increase in use of stimulants and alcohol.
- Increasing fear of death.
- Change in eating patterns.
- Feelings of helplessness.

Strategies to ward off or cope with burnout are important:

- ❖ Participate in a support network.
- ❖ Consult with professionals to explore burnout issues.
- ❖ Attend a support group to receive feedback & coping strategies.
- ❖ Vary the focus of care giving responsibilities if possible (rotate responsibilities with family members).
- ❖ Exercise daily and maintain a healthy diet.
- ❖ Establish “quiet time” for meditation.
- ❖ Get a weekly massage.
- ❖ Stay involved in hobbies.

*Taken from article on Caregiver Burnout by Dr. M. Ross Seligson. Dr. Seligson, Ph.D., P.A., is a Licensed Psychologist in Ft. Lauderdale, Florida. He has supported Caregivers in his community for a number of years, including participation in AIDS, Mental Health, Cancer and Educational organizations.

REDUCING THE STRESS OF CAREGIVING

Caregiver “burnout” is a common phenomenon. However, there are many practical steps you can take to reduce the stress of caring for an elderly parent, relative, ill spouse or other loved one.

- **Build a support system.** Emotional support is essential for your well being. Whether it is with a friend, relative, church member or through formal therapy, the result is the same – you relieve stress by talking about your situation.
- **Recognize the range of emotions that accompany caregiving.** Caregiving can be rewarding, and it is often something that we do instinctively, especially when the recipient is a parent or spouse. However, it is not uncommon to experience frustration, anxiety, fear, anger or resentment while in the midst of caregiving. Giving an outlet to these very normal feelings is a part of keeping yourself healthy in the midst of your caregiving role.
- **Separate yourself from your loved one’s condition.** Allowing time for yourself makes you a better caregiver. One of the biggest mistakes you can make is to give up your own life to take care of the other person. It may feel like a balancing act at times, but to the best of your ability continue to do some things that give you pleasure or satisfaction.
- **Ask for help when you need it.** You can’t always do everything yourself. Summoning outside help does not suggest that you are being unfaithful to your loved one. Friends and family are often willing to help with specific tasks, like running errands or just sitting with the person while you take some time for yourself. If such resources are not available, home care, adult daycare or housekeeping services can also give you a break. Respite care resources can provide a healthcare worker to lend a hand when needed.
- **Prepare in advance.** Learn as much as you can about long term care options by visiting nursing homes and assisted living facilities before the health of your loved one declines and more intense nursing care is required. Talk to friends, coworkers and associates about their personal experiences in this regard. Gather data and make informed decisions.
- ***Be realistic about what you can and cannot do for an aging or ill loved one.***

WAYS TO CARE FOR CAREGIVERS

The best tips and ideas collected from Caregivers and care managers of the Medicare Alzheimer's Project in Broward and Dade Counties, Florida:

- Laugh about something every day.
- Take care of yourself physically.
- Eat a well-balanced diet.
- Talk with someone every day.
- Let family and friends help. Give them printed material on memory disorders so they can better understand your relative. Give them a chance.
- Give yourself permission to have a good cry. Tears aren't a weakness, they reduce tension.
- Exercise. A brisk walk counts.
- Get adequate rest.
- Try a bowl of Cheerios and milk before bed to promote sleep.
- Avoid tension-filled and or noisy movies at night. The late news itself can add to stress. Skip it.
- Reduce daily caffeine intake.
- Get professional help if you feel your support system isn't adequate or if you feel overwhelmed.
- Take a break every day, even if it's only 10 minutes alone in the back yard.
- Explore community resources and connect yourself with them.
- Listen to music.
- Learn relaxation techniques.
- Regularly attend one or more support groups and education workshops.
- Give yourself a treat at least once a month: an ice cream cone...a new shirt or dress...a night out with friends...a flowering plant.
- Know your limitations.

ADVANCED PLANNING

GETTING IMPORTANT PAPERS TOGETHER

Although each situation is different, the following suggestions can help most people begin creating a financial and personal record.

Personal Records - A personal records file should include the following:

- Full legal name.
- Social Security number.
- Legal residence.
- Date and place of birth.
- Names and addresses of spouse and children (or location of death certificates if any are deceased).
- Location of will or trust.
- Location of birth certificate and certificates of marriage, divorce, and citizenship.
- List of employers and dates of employment.
- Education and military records.
- Religious affiliation, name of church or synagogue, and name of clergy (if desired).
- Memberships in organizations and awards received.
- Names and addresses of close friends, relatives, doctors, and lawyers or financial advisors.
- Requests, preferences, or prearrangements for burial.

Financial Records

- Sources of income and assets (pension funds, interest income, etc.)
- Social Security and Medicare information.
- Investment income (stocks, bonds, property).
- Insurance information (life, health, and property) with policy numbers.
- Bank accounts (checking, savings, and credit union).
- Location of safe deposit boxes.
- Copy of most recent income tax return.
- Liabilities – what is owed to whom and when payments are due.
- Mortgages and debts – how and when paid.
- Credit card and charge account names and numbers.
- Property Taxes
- Locations of personal items such as jewelry or family treasures.

Caring for an older person or preparing for our own aging can be more successfully managed by making **decisions and arrangements before a crisis develops**. Several documents should be considered.

- Durable Power of Attorney – authorizes one person to handle personal or financial matters for another even if the principal becomes legally incompetent.
- Health Care Treatment Directive – authorizes you to state in advance your wishes regarding use of life-prolonging procedures. It is not restricted to use only when you are terminally ill. It has no effect until you can no longer make or communicate decisions for yourself.
- Durable Power Attorney for Health Care Decisions – allows you to appoint an agent to make health care decisions, which you have not already covered in your Health Care Treatment Directive. This document goes into effect when you lack the capacity to make or communicate decisions for yourself.

It is advisable to consult a lawyer before setting up a durable power of attorney, joint accounts, trusts or guardianships. Most libraries have legal directories or you can contact the American Bar Association, or your local Lawyer Referral and Information Service.

Free legal and financial services are often available to help older people and their families. For assistance, you can call your local Area Agency on Aging.

WHAT CHANGES TO LOOK FOR IN YOUR OLDER LOVED ONE THAT MAY SIGNAL A CHANGE IS NEEDED?

When you begin noticing changes in your older loved one, gather some of the following information to help you pinpoint where the change may lie.

Activities of Daily Living:

- Can the person bathe and dress self?
- Can the person fix own meals safely?
- Can the person take medications correctly?
- Can the person move about the home?

Instrumental activities of Daily Living:

- Does the person have independent social contact?
- Can the person do the grocery shopping?
- Can the person keep home clean, orderly without assistance?
- Can the person manage checkbook, pay bills?

Memory Loss/Confusion:

- Does the person become forgetful or confused re: time, dates, what to do?
- Does the person have unexpected mood changes for no apparent reason?
- Does the person complain of being bored or lonely?
- Is the person sad or cry a great deal?

When you have the details, share your findings with the older adult and family members. Receptivity and open communication are key ingredients. Put yourself in your elder's shoes. Accepting assistance for many people is difficult.

If you meet resistance:

- Give the older person time to think, unless immediate danger exists.
- Talk with the doctor – older people are more likely to follow the advice of the physician.
- Suggest trying out a service.
- Enlist a trusted friend, minister for help.
- As much as possible, the elder should make the decision.



A Caregiver's Bill of Rights

I have the right...

- to take care of myself. This is not an act of selfishness. It will give me the capability of taking better care of my carereceiver.

- to seek help from others even though my carereceiver may object. I recognize the limits of my own endurance and strength.

- to maintain facets of my own life that do not include the person I care for, just as I would if he or she were healthy. I know that I do everything that I reasonably can for this person, and I have the right to do some things just for myself.

- to get angry, be depressed, and express other difficult feelings occasionally.

- to reject any attempt by my carereceiver (either conscious or unconscious) to manipulate me through guilt, anger, or depression.

- to receive consideration, affection, forgiveness, and acceptance for what I do from my carereceiver for as long as I offer these qualities in return.

- to take pride in what I am accomplishing and to applaud the courage it has sometimes taken to meet the needs of the person I am caring for.

- to protect my individuality and my right to make a life for myself that will sustain me in the time when my carereceiver will no longer need my help.

- to expect and demand that as new strides are made in funding resources to aid physically and mentally impaired persons in our country, similar strides will be made toward aiding and supporting caregivers.

My specific caregiver's bill of rights are:

CAREGIVER RESOURCES AND INFORMATION

Resources are available for information and guidance, including:

National Institute on the Aging Information Office of Consumer Affairs
9000 Rockville Pike
Building 31, Room 5 C27
Bethesda, MD 20892
301-496-1752
www.nia.nih.gov

National Council on the Aging
409 Third Street, S.W., Second Floor
Washington, DC 20024
202-479-1200
www.ncoa.org

American Association of Retired Persons (AARP)
601 E. Street, N.W.
Washington, DC 20049
202-434-2277
www.aarp.org

Children of Aging Parents
1609 Woodbourne Road
Suite 302A
Levittown, PA 19057
800-227-2794
www.caps4caregivers.org

CARING FOR AGING PARENTS OR LOVED ONES ADDITIONAL RESOURCES

Family Caregiver Alliance

- www.caregiver.org

National Family Caregivers Association

- www.nfcacares.org

Geriatric Care Managers

- www.caremanager.org

Administration on Aging

- www.aoa.gov

Elder Law Answers

- www.elderlawanswers.com

Right At Home (Kansas City Metro Area)

- www.swkansascity.rightathome.net

Alzheimer's Association

- www.alz.org

PRESENTATION EVALUATION

Date: 5-5-16

Topic: Caring for Aging Parent or Loved Ones

Presenter: Myra Dillingham

Company: East Central College

Please complete this evaluation before you leave and return it to the presenter.

	1 = Poor	2	3	4	5 = Excellent
1. Presenter was knowledgeable of the subject matter.					
2. Presenter encouraged participation.					
3. Presenter communicated effectively.					
4. Presenter was enthusiastic and able to stimulate interest.					
5. The content provided me with helpful skills and insight.					
6. The presentation content was organized and clear.					
7. Overall, the presentation was satisfactory.					

8. What concepts presented will be most useful to you? _____

9. What other training would you like to see offered by your organization? _____

10. We value your input. Please provide any additional comments. _____
