



# *Helping Families Cope*

an Alzheimer's Resource Guide  
for Family Caregivers

*by Joy Glenner*

Prepared exclusively for Home Instead, Inc. by Joy Glenner, President and  
Founder, The George G. Glenner Alzheimer's Family Centers, Inc®.

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*Dedicated to all the family caregivers  
who taught us the true meaning of  
love and courage.*

*J.G.*

## You are Not Alone

Each day is fraught with fear and frustration for those who live with Alzheimer's disease. They experience the fear of getting lost in their neighbourhoods or not remembering the faces of those they love and the frustration of not being able to perform simple, familiar tasks.

Those with Alzheimer's disease are not the only ones whose lives are filled with fear and frustration. As a caregiver for someone with Alzheimer's disease, you also experience the consequences of the disease. You are not alone; more than 80 percent of the people with Alzheimer's are cared for by a family caregiver.

Some family caregivers are famous – like former American first lady Nancy Reagan, who cared for her late husband, former President of the United States, Ronald Reagan.

Most family caregivers aren't famous. They are individuals that have numerous responsibilities and are often caring for other family members at the same time. Leslie, a single mother from Auckland caring for a young daughter and her 91-year-old grandmother with Alzheimer's disease, in her home, helps to illustrate this situation:

*“Because my grandmother is home alone during the day, I come home over my lunch hour to check on her. Grandma has been living with me for three years, but still thinks she is visiting. At first, she was quite independent and resisted any kind of help, saying she could do everything on her own. One day I discovered that she had gone into the back yard, locked the door behind her and spent the afternoon sitting in the sun. The temperature reached 33 degrees that day, and Grandma had not eaten or drunk anything all day. This made me realise that for her safety and wellbeing, she shouldn't be alone anymore.”*

## A Real Threat

The physical, emotional and financial effects of caring for a family member with Alzheimer's disease can be serious threats to your welfare, especially as stress and pressures mount.

*A 1999 study in the Journal of the American Medical Association, co-authored by Dr. Richard Schulz, Director of Gerontology at the University of Pittsburgh and a leading researcher on caregiver stress, revealed that family caregivers caring for an ailing spouse were 63 percent more likely to die sooner than those who were not caregivers.*

Social losses can add to other stresses you may have as a caregiver. If you are caring for your spouse; you have lost your companion. You may also experience other social losses such as relatives and friends who drift away.

With all your responsibilities, you may lose continuity in your household routines, especially when you have a loved one who is restless or who wanders.

One major need family caregivers express is “to get away from it all once in a while.” Short intervals of relief, or respite, along with emotional support and “how to” tips, are important to sustain you around-the-clock, seven days a week, in your caregiving responsibilities.

In New Zealand most family members enter into the caregiving role without any training and with limited information about how best to cope with Alzheimer's disease. When caregivers are equipped with some practical information and easy-to-apply techniques, they can more effectively care for their loved one and reduce their own level of stress. This booklet offers practical tips and resources to family caregivers struggling to care for their loved ones.

## Alzheimer's Care: Practical Tips

During the early months or years, individuals with dementia are aware of their mental impairment. They usually respond to their memory problems in a way that is typical of their personality. Some are passive and resigned to their fate; some are angry and abrasive; but almost all are depressed with low self-esteem.

As the disease progresses, individuals with Alzheimer's become more clinging and dependent and lose the ability to do the things they once enjoyed. As a family caregiver, your loved one's behaviour may shock or bewilder you. You may be anxious and searching for ways to cope. Following are some suggestions to use with your loved one when daily tasks that were once automatic become difficult and result in frustration, fear, agitation and even aggression.

- **Limit choices** – Having fewer options makes deciding easier. Whether it is laying out clothes for dressing or choosing between coffee and tea, it is important to limit choices for easier decision-making. Reducing distractions also helps a person with Alzheimer's disease focus on one thing at a time.
- **Involve your loved one as much as possible** – Set up successful accomplishments each day that allow your loved one to do tasks he or she is still able to do. This may require some cueing, prompting and patience. For example, you can place an electric razor or a hairbrush in your loved one's hand and use verbal cues such as “shave your face,” or “brush your hair.”
- **Allow more time** – Keep in mind that everything takes more time when your loved one has Alzheimer's disease. Providing simple one-step instructions and allowing more time to perform a task may be necessary.

- **Plan your loved one's schedule wisely** – Determine what time of the day your loved one functions the best and is the most agreeable. Schedule the most difficult tasks – such as bathing or doctor's appointments – during this time period.
- **Establish a routine** – Routines make the day less confusing for a person with Alzheimer's disease. Develop a daily schedule and keep to it.
- **Maintain flexibility** – A person's ability to function and his or her level of independence steadily declines as the disease progresses. As this occurs, it becomes even more important for you to be flexible and adapt daily routines as necessary.
- **Relax your standards** – As a family caregiver, you shouldn't worry about the way things should be done. Allow your loved one to do as much as possible with the least amount of confusion and assistance. For example, if Dad or Mum insists on wearing the same clothing every day, buy a few identical pieces so laundry does not become an issue, and he or she can remain clean and groomed. Bathing every day may not be necessary if it upsets your loved one. Sponge baths between showers or tub baths can eliminate hygiene issues and any added stress.
- **Maintain a safe environment** – Alzheimer's disease impairs good judgment and increases the risk of falls or injury. You need to safety-proof your loved one's home environment. Here are some recommendations:
  - Avoid throw rugs and extension cords anywhere the person walks.
  - Install handrails on stairs and in bathrooms near the bath and toilet.

- Use bathroom equipment, such as a shower bench, raised toilet seat and a hand-held shower.
- Install locks where you store medicines, including over-the-counter products.
- If your loved one smokes, keep matches secure and do not allow him or her to smoke alone.
- Keep smoke detectors operational and maintain a fire extinguisher.
- Hide hats and coats from loved ones who may wander.
- Lower the bed to reduce the risk of falling and injury during the night.
- Use nightlights throughout the home, especially for someone who is restless or wanders at night.

Remember, caregiving requires flexibility. It also helps you cope with what lies ahead.

## Communication to Smooth the Process

When a person has Alzheimer's disease, the damage to his or her brain can make it difficult to recall or to understand words. Attempting to recall or decipher words can be overwhelming and result in frustration. The person may become agitated or repeat one word or a question over and over – a true test of your patience and understanding.

Individuals with Alzheimer's disease or related dementia often:

- Lose their train of thought
- Need more time to comprehend what is being said
- Swear or use abusive or offensive language.

As a family member, you can enhance communication with your loved one by:

- Avoiding distractions and noise
- Keeping things simple – using short sentences and plain words
- Avoiding questions – offering suggestions instead
- Being patient and not interrupting when your loved one is expressing him or herself
- Maintaining eye contact and showing interest. Staying near your loved one, so he or she knows someone is listening and trying to understand
- Not taking it personally. As hurtful as it is, you need to remember it is the disease talking, not your loved one
- Using props and cues to increase recognition. For example, when taking your loved one to the bathroom, you can point to the toilet and ask, “Do you need to go to the toilet?”
- Remaining calm – using a normal and relaxed voice. Patience pays off with a smoother day.

## Making Mealtimes More Enjoyable

The senses often diminish with age. Even healthy older adults lose their appetites when the senses of taste and smell weaken. In addition, Alzheimer’s disease contributes to these natural changes in appetite and eating, because of the decisions that need to be made on what foods to eat, and how to use utensils. Some food requires cutting, unwrapping, reheating and seasoning to taste – all tasks that are difficult for an older adult with Alzheimer’s or related dementia.

## Causes of Mealtime Problems

Other issues can cause mealtime problems for those with Alzheimer's disease. Following are some common issues and recommendations:

- Ill-fitting dentures can cause pinching and problems with chewing and may cause painful sores. If your loved one wears dentures, make sure they fit properly.
- Chronic diseases such as stomach problems, diabetes and especially depression can decrease appetite. Constipation also contributes to a lack of appetite. Liquid or powdered nutritional supplements may be needed to treat poor appetites.
- Certain foods may interfere with medications. It is important to ask questions and talk to your loved one's physician about preparing menus that are appropriate with prescribed medications.
- Table manners may be lost as Alzheimer's disease progresses. Your loved one may spill or drop utensils and dishware. Consider using plastic plates, bowls and cups. Large cloth napkins can also help avoid stains on clothing.
- Impulse eating may occur. Your loved one may overeat or try to eat non-food items. It is best to keep mealtime simple and in a quiet environment.
- Swallowing may become difficult as the disease progresses because it involves a voluntary and involuntary reflex. Consider learning the Heimlich maneuver to assist in the removal of food that lodges in the throat.
- Avoid serving hard lollies, hotdogs, whole grapes or cherries with pips to your loved one if he or she has swallowing problems or is at risk of choking.

## Additional Nutritional Tips for Family Caregivers

Following are some tips for you to use during mealtime:

- If a plateful of food is overwhelming, try placing one item at a time in front of your loved one and give verbal cues such as, “look at the orange carrots,” or “here’s the roast chicken that you like.” Wait to place the next selection on the plate until your loved one finishes eating the first item.
- Allow plenty of time to eat and keep the environment quiet.
- Breakfast time seems to be when individuals with Alzheimer’s are most alert and most hungry. Plan the most food for this time of the day in order to maintain your loved one’s weight.
- Remind your loved one to chew and swallow.
- Research studies have shown that people with Alzheimer’s disease eat as much as 25 percent more when their food is served on brightly colored plates. Use bright colors to make it easier to distinguish between the plate and the food.
- Make sure the plate or bowl is secure on the table to avoid slipping and frustrating spills.

Supplying your loved one with good nutrition in a calm and stress-free environment can make it possible for him or her to cope both physically and emotionally with this disease. Taking extra time to set the tone for a successful meal can increase quality of life and reduce the risk of malnutrition. When you plan a day well, the result is a calmer, more relaxed day.

## When to STOP Driving

Driving is a routine part of an adult’s life and a symbol of competence and independence. Taking driving privileges away from a loved one is one of the most difficult decisions you must make as a family caregiver. The loss of driving is one of the most difficult adjustments someone with Alzheimer’s disease may face.

Competent driving requires focused concentration and quick reaction. Alzheimer's disease alters a driver's ability to make fast decisions and to execute them while driving. Here's how Alzheimer's disease can affect those who drive:

- Distractions can impair the ability to observe visual cues, such as brake lights on the car ahead or traffic lights and signs.
- Visual spatial skills decline. These skills help a driver judge distances. When they do decline, driving problems arise.
- Individuals with Alzheimer's may get lost easily and become frightened and agitated, which can lead to accidents.

### **Making the Decision to Stop Driving**

As a family caregiver, it is often up to you to decide when your loved one's diminished reasoning skills make it unsafe for him or her to drive. You may struggle with this dilemma and be reluctant to stop your loved one from driving. You can assess your loved one's skill level by asking the following questions.

Does your loved one have difficulties:

- With co-ordination?
- Making decisions?
- Staying alert to changes?
- Participating in multiple tasks?
- Judging distances and space?
- Driving at an appropriate speed?
- Exhibiting anger and frustration?
- Recognising familiar places?

## What to do if Giving up Driving Becomes an Issue

When you no longer allow your loved one to drive for safety reasons, you may need to provide support and validation. The person with Alzheimer's disease has experienced yet another loss. He or she may become angry or resentful and attempt to bargain for driving privileges. Consider these options as you work through the issue of giving up the car keys:

- *Out of sight, out of mind.* Find a place to park the car away from the home.
- Keep the car keys in a hidden place, never in sight of your loved one or easily available in a purse or on a counter.
- Sell the familiar car and replace it with a different car and color. It may not be recognized by your loved one, and he or she may think it belongs to the neighbours.
- Have a mechanic install a *kill switch* that disables the car, but can be engaged when necessary.
- Ask your loved one's GP to write a restricted driving order on a prescription pad and present it as an official document. This relieves you from taking driving privileges away. Be sure to arrange this with the GP before the appointment.

## Stand Firm and Be Patient

Arguing and trying to reason with explanations do not make it easier for an older adult with Alzheimer's disease, or another form of dementia, to accept this loss of independence. Engage other family members or friends to offer transportation during this transition to downplay the loss of driving. Encourage your family to focus on activities you still enjoy together.

## Legal Planning

Legal planning is very important for your family and your loved one with Alzheimer's disease. As the disease progresses, he or she will no longer be able to make sound decisions about finances or health care. You should have legal documents in place that identify those who will make important decisions on behalf of your loved one with dementia. Ideally, these documents are in place long before you need them. If they are prepared during the early stages of Alzheimer's, the person affected by the disease may be able to participate in the process and share his or her wishes.

Legal planning can be confusing and sometimes overwhelming. Your family should seek the advice of a lawyer or financial professional as soon as possible to help you make informed decisions about estate planning and wills. Age Concern, health care professionals and organisations specialising in legal and health care issues are available to help guide you through health care decisions and planning. Information is available through the New Zealand Law Foundation, community medical societies, medical centres, senior programmes and Age Concern.

Legal documents can vary over time. As a family caregiver and someone making important decisions, you should look at several items. These include:

- Living Will
- Estate Planning
- Enduring Power of Attorney (EPA)

## Enduring Power of Attorney

Do you feel confident that others would know how to look after you and your property if you became unable to do so yourself, such as through accident, illness or incapacity?

There may come a time when you become unable to make or communicate decisions yourself. It is crucial that someone you trust knows how you would want your life and property handled.

One way to ensure this is to appoint someone to act on your behalf by giving them “enduring power of attorney”.

The Protection of Personal and Property Rights Act 1988 (PPPR Act) introduced the concept of an Enduring Power of Attorney (or EPA). This is an authority given by you to someone to look after your affairs and it continues to be valid even if you lose your capacity to make or communicate decisions.

Consider an EPA along with your Will when planning ahead.

## What is an Enduring Power of Attorney?

There are two kinds of EPA:

- One that covers a person’s property
- One that covers their personal care and welfare.

## EPA for Property

- You can choose when you want a power of attorney for property to take effect - now, or when you can no longer manage your affairs.
- You can give the attorney full power over all your property or limit power to, for example, looking after specific investments or property. An EPA for property can apply to as many or as few assets as you, the donor wishes; but if it is to be limited that must be specified.

- You may appoint one or more persons or a trustee company as your property attorney.

### **EPA for Personal Care and Welfare**

- This EPA will only come into effect if you become incapable of making or communicating your decisions.
- EPA for personal care and welfare can only be given to one individual and not to a trustee company.
- The EPA can authorise the attorney to act in relation to your personal care and welfare generally or only in relation to stated specific areas.

### **What are the responsibilities of an attorney?**

Attorneys must not abuse the trust placed in them. They should not act dishonestly, invest your money recklessly or do anything they do not have authority for under the power of attorney.

Their responsibilities will depend on the type of EPA you make and the instructions you have set out in it. If you want their authority to be limited to certain areas you must specify what these are.

You can impose some conditions or restrictions on what they can do - your lawyer can advise you how workable the conditions and restrictions may be. If there are certain people you would not want looking after you or performing certain tasks, you should also record this.

## **Can I change my mind about giving someone power of attorney?**

Yes you can change, vary or revoke (cancel) your EPA at any time while you are still mentally capable.

Different procedures are needed to replace, revoke or vary your EPA, so you should get legal advice as to which is most suitable for your situation.

Making a new EPA does not automatically revoke (cancel) an existing one. Preferably revocation should be done in writing, and needs to be signed and witnessed.

If you do replace, revoke or vary your EPA you must tell the attorney, banks or anyone else who has been operating under the EPA, preferably in writing.

## **Who decides whether I am mentally capable or not?**

“Mentally incapable” means:

- In relation to property, being not wholly competent to manage one’s affairs;
- In relation to personal care and welfare, being wholly or partly unable to understand the nature and foresee the consequences of decisions, or wholly lacking the ability to communicate decisions.

For a full definition see Section 94 of the Protection of Personal and Property Rights Act 1988.

Your attorney or lawyer can and may seek a medical assessment when deciding whether your EPA will come into effect and when you can no longer manage. You can require them to take certain steps to have your capability assessed by specifying it in your EPA. For example you might specify as a precondition to the attorney acting:

- A family meeting with you and your attorney to discuss concerns, perhaps with another independent person such as a community

- social worker to observe and advise; and
- A medical assessment by your GP; and/or
  - A specialist assessment by a geriatrician.

If required, the Family Court can decide whether someone is mentally incapable, after looking carefully at all the evidence.

## **Living Will**

A “living will” is a document that states the type of care a person wants or does not want when he or she is terminally ill. For example, a living will could include a “do not resuscitate” (DNR) order. It can be difficult to invoke a living will because it requires those involved to determine when an illness is terminal.

## **Estate Planning**

Estate planning includes documents such wills and trusts. Living Trusts allow for an individual’s estate to be managed and used for stated purposes, such as taking care of a person during his or her lifetime.

## Feelings, Behaviours and Activities

The feelings that individuals with Alzheimer's experience often lead to unique behaviours. These behaviours can result in never-ending challenges. Combine your feelings with your loved one's feelings and your lives can spin out of control.

As a family caregiver who faces challenges with your loved one, you can benefit by looking at various situations from your loved one's perspective. The following steps can help:

1. Define your loved one's feelings. These can include confusion, worry, anxiety, frustration, fear, paranoia and anger.
2. Assess the behaviours that result from these feelings.
3. Explore activities that will focus your loved one away from an unwanted behaviour while affirming his or her personal identity.
4. Remember humor is the best medicine for adjusting to frustrating challenges.

### Confusion

People with Alzheimer's disease often feel confused. They may be confused about the time of day, about where they are and who they are seeing. Behaviours caused by confusion include:

- Wandering or looking for home
- Following a caregiver around because they fear becoming lost if they are out of sight
- Initiating inappropriate or dangerous activities

### Worry and Anxiety

As a family caregiver, you may find that worry and anxiety plague your loved one. He or she wonders what lies ahead and is unable to follow the everyday details of living.

Worry and anxiety often cause these behaviours:

- Rummaging for money
- Searching for missing items
- Striking out

‘Place’ is also a common concern. Many people with Alzheimer’s disease are uncertain about where they are. The result may be that they constantly inquire about home by asking “Where is home?” Sometimes it’s the only thing on their mind. Who could blame them?

Another obsession may be money. A confused person may be concerned about survival. Money is often a lifetime issue. This can result in behaviours that include non-stop inquiries and rummaging for hidden cash.

Then there’s the constant worry about their material possessions. Older adults with Alzheimer’s disease can no longer keep track of things. If an item is not in front of them, *it is lost or stolen*. They may spend hours searching for lost things.

## **Fear**

Fear is a predictable emotion for those with Alzheimer’s and other dementias. The first fear is often the loss of independence. When an older adult feels independence slipping away, fear fills the void.

People with Alzheimer’s disease seek to have their feelings confirmed. They check their emotions by constantly questioning their family caregiver with “I’m lost” and wait for the reply. They may follow up with “When can I go home?” Again, going home

to safety is often the sanctuary they desire. Other fear responses include questions such as:

- “Where are we?”
- “What will become of me?”
- “Where’s my daughter?”

They may also:

- Want to know who to turn to
- Want to keep everything in sight
- Become agitated (because they feel stranded or lost)
- Need constant reassurance.

When you imagine your loved one’s feelings of confusion and fear, it’s easier to understand how those feelings can lead to frustration. What’s more, individuals with Alzheimer’s disease cannot sequence events properly and that, too, makes them feel frustrated or angry. For example; when looking at a plate of food, they may not recognise it, or they may not understand what to eat, or how to use the utensil. The behaviour that follows may be to simply sit there, not eat and push the plate away out of frustration.

Not being able to put routine actions in sequence can turn your loved one’s world upside down. Common actions become impossible tasks. The behaviour around this maddening circumstance may be to strike out in frustration. Family caregivers are often the recipient of this rage. To understand how this feels, imagine how you would react if you looked in the mirror and didn’t recognize the person staring back.

## **Paranoia**

People with Alzheimer’s disease can become paranoid and show it in the following ways:

- They may feel that someone or something is out to get them

- They can be accusatory: “Someone is trying to poison me,” believing someone is trying to poison them with food they do not recognise
- They believe everyone is robbing them.

Paranoia may result in the following:

- Fear of strangers, thinking these people are evil
- Anger, resulting from not understanding what is happening
- Agitation that occurs when the person with Alzheimer’s feels fear and anger.

### **Catastrophic Reactions**

A catastrophic reaction is a sudden change in behavior for the worse, due to a person’s inability to process, understand, and cope with input from the environment. Catastrophic reactions can be violent and dangerous to the person with Alzheimer’s disease and to those people who are nearby. If one occurs, it is imperative that you help redirect your loved one to another place or activity. If these reactions persist, you should consult your loved one’s doctor regarding medication to manage the behavior.

## **Creating Meaningful Activities**

For a person with Alzheimer’s disease, an activity is *anything that occupies time*. When time isn’t filled, it can be spent on the creation of new and challenging behaviours. As a family caregiver, you can also benefit from activities in the following ways:

- Increased free time
- Increased quality of time spent together
- A happier loved one.

Activities should be for pleasure and success, not training or discipline.

The most meaningful activities that you can plan for your loved one are those that complement lifetime habits. To design these activities, you need to assess your loved one's lifestyle activities before Alzheimer's disease and put them into one of the following two categories:

- **Home Activities**

Did your loved one pay the bills, cook the meals, organise activities, water the plants, shop, do laundry, build and repair items, do yard work, etc?

- **Career Activities**

Was your loved one an accountant, secretary, manager, waiter, soldier, tradesperson, volunteer, teacher, academic, CEO, homemaker or banker? Think about the activities the job involved.

### **Activities should:**

- Mirror your loved one's life experience
- Honour the need to feel useful and appreciated.

One way to mirror a loved one's life experience is to create an environment that is similar to one from the past. For example, if he or she had an office at work, you can create a similar space in the current environment. Make it safe by eliminating scissors, staples, letter openers, tacks or matches. Remove important mail to a new location under your control and place nonessential mail in trays for sorting. Ask neighbours and family members to save catalogues for a mail sorting activity.

Items typically found in a garage provide a good sorting activity for men. Provide several boxes or jars for sorting. Your loved one can sort nuts and bolts into jars and boxes. Remove dangerous items and

replace them with sanding wood and leather objects to craft. Other things in a garage may also interest women, such as seasonal greeting cards, wrapping paper, ribbons and bows, gift boxes and countless holiday decorations.

Use a card table, craft table, dining room table or a garage bench. Provide the containers and allow your loved one to sort them in his or her creative way. Christmas in July is just fine.

The following example shows a meaningful activity that a family caregiver and her mother could do together:

*I came up with the idea of making necklaces out of cereal and string to keep Mum busy in the morning. Stringing the cereal onto the string required concentration and she enjoyed doing it. I took the activity a step further and decided to give the necklaces to Mum's grandchildren. When I shared my idea with her, she was excited and wanted to make more.*

Another popular location for meaningful activities is the garden. You and your loved one can spend many hours in the open air with activities such as pulling weeds, watering plants, cleaning dead plants from pots and re-planting with colourful flowers. You can also gather fallen leaves and put them in rubbish bags, or even plant bulbs. If your loved one wanders, just be sure to secure the garden.

Working with the laundry is a familiar activity. All you need is clean laundry and a basket. You and your loved one can arrange, fold and stack laundry such as bath towels, kitchen towels, pillow cases, etc.

You can still share cooking as an activity with some changes in approach. Keep your loved one from the stove and electrical appliances, and remove dangerous utensils.

Use mealtime clean-up as an activity. Tell your loved one that you will set the table if he or she will clear it following the meal. It is important that the person with Alzheimer's receives cues to get

started and instructions on where to place the items near the sink. If you have a dishwasher, load it, but keep a few plastic items out to wash in sudsy water. Your loved one can wash and you can dry and put the dishes away.

The following example shows how a family caregiver involved her sister, Rebecca, in a mealtime activity:

*When it came time to prepare dinner each night, Rebecca would want to help, but was no longer able to cook step-by-step or handle the hot foods. So I encouraged her to set the table, butter the bread, and select a juice so she could still be involved. The most challenging thing for me was to keep Rebecca busy and occupied, yet safe at the same time. It was well worth the extra effort. I could tell Rebecca was happy to be included.*

Sweeping and dusting are safe and useful tasks. Be sure to remove collectibles and valuables before initiating these activities.

You can spend many happy hours looking at magazines with pictures. Ask friends and relatives to save them for you.

Following are some additional suggestions to use with your loved one as you do activities together:

- Plan each day one step at a time
- Be flexible, if something doesn't work, go to plan B
- Accept outside support when it is offered
- Speak slowly and refrain from asking your loved one any questions

- Right now is forever, so enjoy it.

The best way to approach any activity is to simply think how you would like to be treated.

## Caring for the Caregiver

Caregiving may have negative impacts on your wellbeing unless you learn to recognise and address important issues.

It's estimated that half of all Alzheimer's family caregivers experience depression. Family caregivers also experience personal health issues, complications in the workplace, fatigue, and stress with other family members that result in conflicts and less leisure time.

On the positive side, some family caregivers find that providing care in the home is beneficial because it gives them a new purpose in their lives, strengthens family relationships, or fulfills commitments to their loved one.

Providing around-the-clock care requires a great deal of time and energy mixed with financial cost. These factors can take a significant physical and emotional toll.

As a family caregiver, you must learn to nurture your own needs. The following recommendations provide you with some coping strategies for these daunting challenges:

- **Look for support** – Many family caregivers withdraw from family and friends because they feel no one understands. It is very helpful and in many cases, therapeutic, for you to join a support group where you can learn from others through sharing your experiences.

- **Let go of guilt** – Let go of “the guilt trip” by realizing a need to temporarily set aside caregiving responsibilities for a respite.
- **Nurture the body** – Be sure to get enough sleep and eat properly.
- **Nurture the mind and spirit** – Schedule family sessions and discuss any conflicts that relate to the care of your loved one. Take breaks from caregiving as often as possible by asking other family members to help. Be sure to acknowledge your feeling of loss and grief.
- **Establish limits** – Say no to requests that are beyond your capacity, and say yes to offers of help with a loved one. Remember, you have your own needs, too.

There are numerous community resources to help you as you care for your loved one. Be sure to contact your local Alzheimer’s service organisation for information.

## A Home Instead Senior Care Stress Resource

Home Instead Senior Care®, the leading provider of non-medical home care for seniors, is available to provide you the respite you need and the care you need for your loved one. With CAREGivers<sup>SM</sup> trained in Alzheimer's care, your local Home Instead Senior Care franchise office is committed to helping families like yours by providing service for just a few hours, or around-the-clock, depending on your needs.

Home Instead Senior Care also provides you a free online assessment tool that allows you to gauge your stress level. Visit [caregiverstress.com](http://caregiverstress.com) for this innovative tool. Once you complete the online survey, you receive tips, advice, and links to important resources.





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