

CAREConnections

Information and Inspiration for Caregivers

A Publication of Boulder County Area Agency on Aging

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Dear Caregiver,

Tiredness, exhaustion, lack of sleep ... all are common side effects of caregiving. At a time when you need to be clearheaded, energetic, and confident that you can handle caring for a loved one, you may find that you're more tired than you realized anyone could be and still keep going. But how *long* can you keep going? How long can you continue to withdraw from your "energy account" without making some deposits to replenish it?

Maintaining your energy requires getting enough sleep, taking meaningful time off, and turning to others for support. Sleep, especially, can be elusive, and it's easy to get into the habit of not sleeping—for whatever reason—and thinking that is normal. It's not! As hard as it may seem to get, a good night's sleep can give you a fresh new look on the world and can make everything seem more doable.

For this issue, we turned to a number of local professionals for their take on preventing and dealing with exhaustion while caregiving. Though they share some common ideas, each has something unique to offer as well. Together they provide many helpful tips and approaches for taking care of ourselves while caregiving.

We hope you find something that's useful to you.

The Editors

Tired All of the Time

by Kathy Naman, MA, LPC



You are a caregiver. That title and identity probably dawned over time. For some, it may have come with a sudden emergency. Your loved one may have suffered a stroke, for example. For others it may have built to a tipping point. Perhaps your loved one was diagnosed with Alzheimer's, and it has been a path of small changes until it's become clear that a progressive and chronic condition exists.

Either way, when we are faced with radical change like this we often respond with crisis skills. We are on alert, rousing energy, doing what needs to be done, researching, finding resources. This is a good and necessary way to go in the beginning. Because we hope and pray for recovery, the crisis mentality is often extended. It is only with time that we truly acknowledge the long road ahead. In the meantime, we are calling on all our inner strength to survive and to care for our loved one. Moving from crisis mode to a longer-term view of caregiving is a



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significant landmark. Exhaustion can set in as caregiving becomes the way that life is.

“This is what is and what is to come.”

“I am responsible. I am the one. I am the caregiver.”

There is grieving. This is not what I thought my life would be. This is not what I thought our lives would be. These thoughts and feelings may come in flashes. In the midst of meeting all the demands of caregiving, who has time to think and ponder in a clear fashion?

Exhaustion? You bet. Caregivers can find themselves in a smaller and smaller world, losing interest in outside activities and people. The effort to get out can begin to feel like just one more thing on the list. Time can feel clunky—like a big chunk of rock that fills all the spaces of schedule with caregiving. Those who care for others can be prone to sleep difficulties, getting sick more often, changes in appetite and weight, feeling hopeless and helpless. A pervasive fatigue can take hold as you find yourself running in a marathon for which you didn’t sign up or receive training.

Hey, wait a minute. This sounds like the symptoms of depression. Indeed, there is a tremendous amount of overlap, and it may be advisable to talk with your doctor about the symptoms and determine whether any medical treatment is indicated. For now, let’s consider some things that might be helpful.

What Else Can Be Done?

A sounding board. Who can you talk to? It may or may not be a professional. Being heard and witnessed can be immensely helpful. The opportunity to step back and assess where you are can be life changing. When we are worn out, we simply do not see as many possibilities.

Off duty time. It is imperative that there are times when someone else takes over—respite care, nighttime help, other family members or friends who stay with your loved one while you take a break. It is imperative that there are times you lay down the mantle of caregiver. It is during these times that you may feel your own essence and remember who you are, apart from caring for your loved one.

Knowing you are not alone. I highly recommend support groups. It is profoundly nourishing to be with people who “get it” because they are living the life you’re living. To be seen and understood by others in this way is invaluable.

Who is on the team? You may be the family member who is able to provide care for your loved one and other family members are at a distance, physically or emotionally. Others can and should

have a role. Perhaps coming to relieve you for a week so you can take a vacation. Perhaps offering financial support for night care or respite care. Perhaps there are modifications to your home or medical equipment that could make caregiving easier. Thinking in terms of a team can again decrease the sense of isolation and sole responsibility. It can also help you to realize you have a right to request that others participate.

There is another aspect I'd like to mention. Friends may ask you, "What can I do to help?" Many caregivers will shrug their shoulders and let the moment pass. They may not be clear in their minds how others can help. It is worthwhile to make a list. Examples might be dropping off a meal, doing some errands, taking your loved one to an appointment. Caregivers can be shy about making such requests. Put it out there. Folks who truly long to help are likely to take you up on it and may be glad you were specific. For those who don't, nothing lost.

Exercise. Yes, exercise. I am recommending exercise even though I know you are tired all of the time and feel overwhelmed. I am recommending exercise because the literature shows that it really helps. Some kind people wrote a great book called *Exercise for Mood and Anxiety: Proven Strategies for Overcoming Depression and Enhancing Well-Being* (Otto and Smits). The approach is gentle and addresses many obstacles to exercise.

Having a schedule. When we are in crisis or survival mode, we tend to "get through the day." Walking through and creating a schedule for the week can be immensely helpful. The emphasis isn't on getting it all done and checking off every detail. It's about—given the circumstances—how can this week bring a sense of satisfaction for me and my loved one? How can this week be embraced?

Spiritual support. I use this term very broadly to mean that which soothes the soul. Whether it is a spiritual community and practices that go

along with that, or yoga, or meditation. It's practices and connections that quiet and replenish.

Is this sustainable? If you are barely getting through each day, then the answer is probably no. If you are a caregiver in a long-term situation, short-term solutions are inadequate. If you are in a situation that is not sustainable, the items above still apply.

Here is the key: you have a right and need to have identities beyond the role of caregiver. You deserve and absolutely need to be seen, heard, nourished. Keeping who you are alive and well is central to your ability to care for another.

As I write this I feel humble and quiet. This short article does not begin to address the complexity of your world. My greatest hope is that you will feel some kinship with all the others who are reading this, maybe finding a breath or a sigh. May you be nourished at the very core of your being. May you be surrounded by others who help to hold you and your loved one.

Kathy Naman, MA, LPC, has a psychotherapy practice in Boulder with a specialty of working with people with depression. Her website, www.supportfordepression.com, offers more information about depression and recovery tools.

The Importance of Taking Respite

by Jacki Myers

As a Resource Specialist for the City of Boulder, I work with family caregivers on a daily basis. I have also been a caregiver for almost ten years for my father. It is difficult work, and we all know how important it is. The emotional, physical, and mental toll it can take is broad and deep no matter how much we rationalize that it's "good work" and "I must be there for him/her" at all costs.

Self-care and taking respite are crucial for us if we want to live a quality life, provide the highest level of care, and be true to ourselves and to others. Caregiving is rarely a responsibility that



is isolated. It takes time away from other family, work and career, and personal time. The stress can mount if you are not taking care of yourself! I often hear caregivers say that they are “stretched” in many directions and that they feel they aren’t doing their best in any of them, which adds more stress.

Respite is very personal to each caregiver. There are standard ways of taking a break: going on vacation, getting together with friends, taking in a movie, hiking, etc. Any and all of these things help rejuvenate our spirit so that we can be present for the care recipient. We are likely to be more patient when we are taking the time to feed our souls. A common concern, of course, is time. How do you make time to get away? You cannot be in two places at once, but you can create boundaries and expectations that are reasonable—it’s okay to say no. And the more centered you are by giving yourself care, the easier it will be to know and express what you need. Set up a system and a schedule as best you can so that you have something concrete to look forward to. Line up other caregivers—family, friends, faith community members, neighbors—to help where possible. You might be surprised how many people want to help. Sometimes they just don’t know what to do.

There are other ways to take time for yourself too. Ten minute breaks “just for you” can really help you recharge. Color, read a magazine, talk with a friend on the phone, take a catnap, do some yoga poses, write in a journal, etc. Even if you are a 24/7 caregiver, you can usually find time to squeeze in something rejuvenating. Maybe the dishes can wait. If you schedule breaks you are more likely to be able to handle the uncertainties and emergencies that invariably come up. You may be more calm and clear in your decision-making and probably less emotional too.

Boulder County is fortunate to have good respite support. The Area Agency on Aging offers

the Respite and Companion Volunteer Program, which provides volunteers who make weekly two-hour visits to frail older adults, enabling the family caregivers to take time for themselves; and the Respite Assistance Program, which reimburses the cost of hiring a substitute caregiver (up to \$500/year) so that family caregivers can get needed breaks. Other agencies provide services that can help caregivers reduce the tasks they need to do themselves. For instance, Carry-Out Caravan, a service of Boulder County Care Connect, provides shopping and delivery of groceries, and Via Mobility Services offers low-cost, reliable transportation. Any tasks that you can delegate can free you up for more self-care and balance.

Sometimes respite can come in a different form. When I was caregiving for my father, I had a two-week vacation planned with my husband and daughter. My dad was doing well, my sister was going to check in with him, and a few of his neighbors and friends were on board as well. Two days before we were to leave, Dad had a downturn and had to go to the hospital. I decided it was best for me to stay home from our trip as I knew he would be frail and decisions would have to be made. So my husband and daughter went on vacation without me. After I finished feeling sorry for myself, I felt a sense of freedom and focus that I hadn’t felt in a long time. It was because I could now concentrate on just one thing: taking care of my dad and myself. Wow! I already had the time off from work, and my husband and daughter were out of town so I didn’t even have to go home (30 miles away). I could just stay with my dad without guilt. I would usually stay with him several nights a week but always felt the pull of whom or what I might be neglecting at home. I, in a sense, had an unintended “respite.” It didn’t look like what I had planned by taking a vacation, but I will always remember it fondly as a time when I became closer to my dad, and really enjoyed

my time when he was napping, sleeping, or otherwise indisposed but safe. I didn't have work and other family members to distract me. When I wasn't attending to my dad I read, dabbled in watercolors, took walks, caught up with friends, wrote letters, cleaned (yes, I enjoy it sometimes), and did other little activities that made me happy. As my dad's health continued to decline, that time alone with him made me stronger and able to handle the difficult times that followed.

So do it. Be creative, breathe, and take care of yourself.

Jacki Myers is a Resource Specialist with City of Boulder Senior Services.

Better Sleep Leads to Better Caregiving

by Richard Shane, Ph.D.

Caregiving is time consuming and stressful. Alertness can lead to better decision making. One change you can make that will help you be a better caregiver is to get better sleep, but you might think, "I don't have enough time to sleep" or "I'm so stressed I don't sleep well." There are many factors that contribute to difficulty sleeping, and stress is the most common. For caregivers that can be stress from concern about their loved one, from overwhelming responsibility, or from lack of control, time, or finances. Stress can make it difficult to sleep, and poor sleep has a damaging effect on so many areas of life. It is important to change that cycle.

Studies have shown that poor sleep can increase the risk of sickness, weight gain, diabetes, heart disease, and high blood pressure. Poor sleep interferes with your ability to think clearly; increases stress, anxiety, depression, and irritability; and decreases your energy and productivity. Those damaging effects impair the quality of your personal relationships, and they impede your ability to be a good caregiver. But how can you get a good night's sleep?

Sleep medication is useful in short-term crisis situations, but long-term use can lead to the need for increasingly larger dosages and to addiction. Even pharmaceutical manufacturers recommend that sleep medications should be used only for the short term. In 2016, The American College of Physicians issued their recommendation that cognitive-behavioral therapy for insomnia should be the first-line treatment for adults with chronic insomnia—instead of medication.

Simple lifestyle changes that support good sleep

Sleep hygiene is a first step to getting better sleep. Implementing these tips can help improve your sleep. At the end of this article is a website for more information on simple steps you can use to ease into sleep, or to go back to sleep, when your head is on your pillow.

- Reduce your caffeine intake and don't drink any after early afternoon.
- If you awaken in the middle of the night, do not use alcohol to fall asleep. When the alcohol wears off, that not only awakens you but makes your heart beat faster, which makes it more difficult to fall back to sleep.
- Stop use of electronic devices 30 minutes before bed. The light from these devices signals your brain that it is still daytime, which interferes with your brain's production of melatonin, the hormone that helps you feel sleepy.
- Slow down during the 30 minutes before bed. Read something calming, listen to quiet music, take a bath, stretch, etc. You don't drive your car 60 miles per hour right up to the stop sign and then jam on your brakes—you slow down as you approach the stop. The same applies with your body and mind, which may have been going fast all day. Give yourself time to slow down before bed.
- Close to bedtime, don't watch anything too stimulating on television, especially the news.
- Go to bed when you're tired. If you push past that "window" of feeling tired, you might get a second wind that then makes sleep more difficult.



- Make your bedroom slightly cool. When you sleep, your body temperature drops slightly. Having a lower room temperature cools your body, which helps you ease into sleep.
- Make your bedroom dark. For someone who has difficulty sleeping, light can make it even more difficult. Close your window shades, or if they don't block light well enough, get quality eyeshades.
- Use your bed only for sleep and lovemaking. In bed, don't pay bills, talk on the phone, or engage in other stressful activities.
- If you are going to have a conversation (in person or by phone) that might potentially be upsetting, try to have it at a time other than close to bedtime.
- Exercise regularly, as that helps reduce stress, but don't exercise vigorously too close to bedtime.
- If you eat too much too close to bedtime, your digestive system will be working while the rest of you wants to sleep, making sleep difficult. So have your last meal a few hours before bed.
- National and world events add to life stress. While you may want to be aware of events, many people watch or listen to the news multiple times a day. I recommend that you take in the news only once per day. It is also preferable to read the news online rather than to watch the televised news, as television deliberately makes the stories more fear evoking for increased impact.

Because caregiving involves so much time and there are so many other things in your life that you have to do, it may seem that the way to save time is to reduce the number of hours you sleep. However, I ask you to try a one week experiment: do all you can to arrange your life to have more time for sleep. When you sleep enough, you will have more energy and be more productive and efficient in your actions and will actually get more done in less time.

Invest a little time and attention into your sleep and your “return on investment” will be huge life benefits from better sleep. After you implement any of the above-listed changes, there are additional simple steps you can use to fall asleep or back to sleep more quickly. You can find these steps at www.sleepeasily.com/basic.

Richard Shane, Ph.D., is a Behavioral Sleep Specialist and developer of Sleep Easily. Dr. Shane is also the Behavioral Sleep Therapist for New West Physicians.

Alzheimer's Association Tips for a Good Night's Sleep

by Ralph Patrick

Most of us are familiar with Rip van Winkle and Sleeping Beauty, neither of whom had problems sleeping! However, for people with dementia and their care partners, these two are truly fairy tale figures. Sleep is often a valuable and incredibly rare commodity.

Being a caregiver for someone with dementia can be physically, emotionally, and mentally demanding. Therefore it is essential to recharge both the brain and body with sufficient amounts of sleep—between seven and nine hours a night. Susan Zafarlotfi, Ph.D., clinical director of the Institute for Sleep and Wake Disorders at Hackensack University Medical Center in New Jersey, says, “Sleep debt is like credit card debt. If you keep accumulating credit card debt, you will pay high interest rates or your account will be shut down until you pay it all off. If you accumulate too much sleep debt, your body will crash.” In order to face the unique challenges of caring for a loved one with dementia, it is essential to take good care of yourself first. This includes getting a good night's sleep. If counting sheep isn't working for you anymore, perhaps you might want to consider the tips suggested in the preceding article in this issue. It may also be necessary to hire a nighttime companion for your



loved one so that you can sleep undisturbed.

And what about the person with dementia? Sleeplessness can be caused by a variety of factors. These include medical or psychological ones such as arthritis, sleep apnea, urinary tract infections, diabetes, and ulcers. There can be environmental causes such as the room being too hot or too cold, poor lighting, and being disoriented. Sometimes sleeping too much or not enough during the day can contribute to difficulties sleeping at night. Being agitated with the care partner, being hungry, or having consumed too much caffeine or alcohol can also contribute.

Effective coping strategies begin with consulting a physician and having a good medical work-up, which should include an evaluation of all the medications being taken and their potential side effects in relation to sleep. Monitoring the amount of sleep during the day and the types and volume of foods eaten, especially in the evening, is beneficial. Getting exercise is invaluable, as is avoiding any upsetting activities during later afternoon and evening hours. Providing appropriate lighting in the bedroom and bathroom is also beneficial.

And what about “sundowning” (agitation and wandering in later afternoon and evening)? Providing distractions such as playing music, doing a craft, or giving the person something to hold that is comforting to the touch may be helpful. Closing blinds and curtains and turning lights on to combat shadows is beneficial, as is minimizing noise, confusion, and unexpected interruptions. Problems with sleeping or late evening agitation are often a stage in dementia that eventually pass. Many people with Alzheimer’s begin sleeping more during the later stages of the illness.

Being able to sleep uninterrupted and for long periods of time may be a thing for fairy tales. However, by implementing some simple strate-

gies you may be able to get the kind of rest that is essential for health and well-being. For more information, resources and support in caring for yourself and your loved one with Alzheimer’s disease or another form of dementia, please contact the Alzheimer’s Association website at www.alz.org/co. You can also call the 24-hour Helpline at 800-272-3900.

Ralph Patrick is Boulder County Coordinator for the Alzheimer’s Association.



Seasonal Self-Care Assessment

by Mary Kathleen Rose

The role of caregiver can be a stressful job, involving challenges that are physical, mental, and emotional. To be effective in caring for others, we also must pay attention to our own needs and be deliberate in our self-care practices. We must nourish ourselves with good nutrition and exercise, and develop effective ways for dealing with changes brought about by caregiving.

Take a moment to assess your own self-care, by answering the following questions:

- Am I satisfied with the amount of sleep I get?
- Do I feel rested when I wake up?
- Am I satisfied with the amount of physical exercise I get during the week?
- Do I enjoy the physical exercise or activities that I do practice?
- Do I eat a healthy, nourishing, well-rounded diet?
- Do I enjoy the food I eat?
- Am I satisfied with the time I spend with others – family, friends, community?
- Do I feel supported by others – family, friends, community?
- Am I able to relax during the day? (i.e. practice deep breathing, sit and meditate, take a hot bath)
- Am I able to adapt and accept changes in my lifestyle?

Which questions can you answer with “yes?”



Give yourself credit for the ways in which you already do take care of yourself. Look at the questions that you answered by saying “no” or “sometimes.” Can you make a change in any of these areas of your life?

Cycles of Self-Care

I find it helpful to approach self-care by taking a look at the natural world. If we can attune to the cycle of the seasons, we can let that awareness bring a healthy balance of self-care measures into our lives. For example, *Winter* is a natural time to rest. It is associated with sleep and stillness. *Spring* is the season of new growth, and is associated with movement, physical exercise, and activity. *Summer* is the time of abundance and warmth, naturally associated with nourishing food. It is also a time for connection with others through social interaction, community activities, and travel. *Autumn* is the time to reap the harvest of the previous seasons, and it is a time to release and let go of whatever is no longer useful. Focus on the breath—inhalation and exhalation—naturally fits with this season.

Just as we learn by observing the natural cycles of the yearly seasons, so we can learn by respecting the cycle of day and night. From a place of rest, we move into activity, reaching out for connection and nourishment from outside of ourselves. We sleep, we move, we eat, we breathe, we let go, and then we surrender to the cycle again. Like all living creatures we live and thrive in natural cycles of activity and inactivity, of nourishment and elimination, of inspiration and exhalation. We honor the changes within the cycles of the day, the week, a year, and a lifetime.

Sleep and Rest

Sleep is the time to refill the reservoir of energy expended during your waking hours. Generally, eight hours is the recommended amount of sleep required for healing and regeneration of the body and mind. But it is important to respect your own needs, which may be for more or less

sleep. For many people, a short nap or two during the day is a helpful supplement to sleeping at night. Caregiving can also alter your natural rhythms of sleep, due to the needs of the ones you are with, so it may be important to take advantage of time to rest in unfamiliar patterns. For example, don't hesitate to turn off the phone or computer, and stick to a boundary of time that allows you to rest.

Movement and Exercise

The human body is designed to move. Caregiving certainly can involve physical activity, but it may be repetitive or uncomfortable. Be careful to learn proper body mechanics for the tasks you need to do. Find physical exercises that allow you to relax, even though you are moving. For example, a walk in nature or a session of gentle yoga or stretching can provide a nice balance to the rigors of caregiving. Even a few minutes at a time, two or three times during the day, can be very beneficial.

Nourishment

Good nutrition forms an essential aspect of self-care. A diet consisting of whole, natural foods, with a balance of macronutrients (protein, fats, carbohydrates) and micronutrients (vitamins and minerals), nourishes us physically, mentally, and emotionally. A key concept to consider in making healthy food choices is *nutrient density*. This refers to foods and drinks that are high in nutrient content relative to the number of calories they contain. They are low in empty calories, such as unhealthy fats, refined sugar and flour, excessive salt, or food additives.

Sometimes being a caregiver requires that you prepare special food for those in your charge. Don't let this prevent you from eating what you need and enjoy. Also, it is important to take time to enjoy food in the company of others—whether family or friends.

(continued on page 9)



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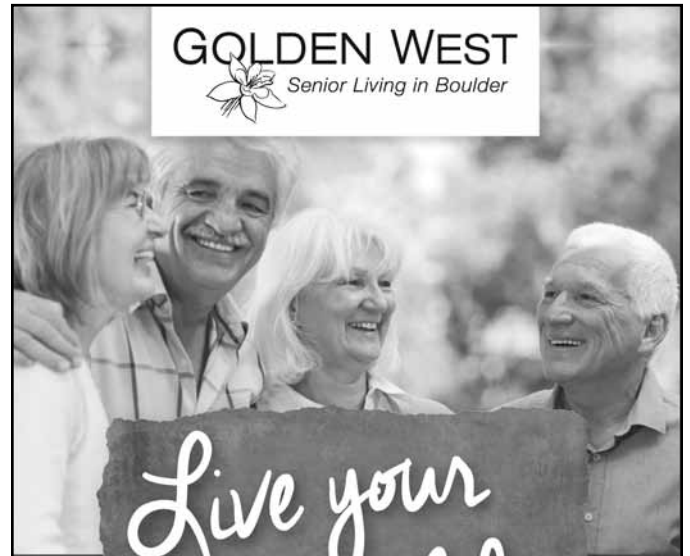


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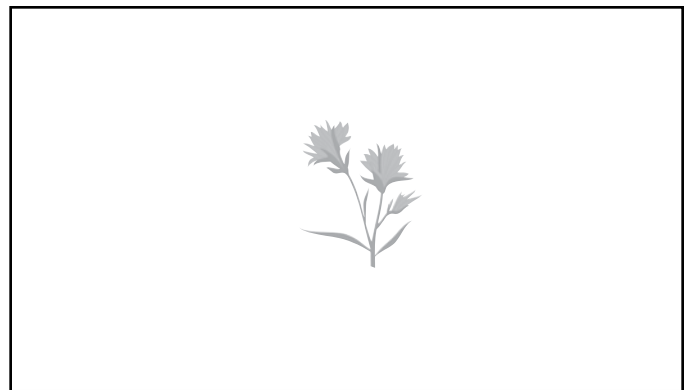


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Seasonal Self-Care Assessment

(continued from page 8)

Conscious Breathing

One of the easiest and most effective ways to nurture yourself is to become aware of your breathing. Slow, deep breathing helps you to cope with physical and emotional distress in the moment and creates a healthy habit for everyday living. Conscious breathing is a way of *letting go* (exhaling) your own discomfort—physical, mental, and emotional—and it is a way of *taking in* (inhaling) the life force necessary to nourish your body and enhance your sense of well-being. Even a breath or two taken consciously can shift your awareness and allow a change of perspective.

Complementary Therapies, Community, and Self-Care

Other avenues of self-care include complementary therapies like massage, music, and participation in hobbies or other creative endeavors. Enjoy these activities by yourself or in the company of others who are supportive of you. Set boundaries on activities that do not support your physical, mental, or emotional sense of well-being.

Caregiving is time consuming, but it is still important to make self-care a priority. You, and those in your care, will benefit.

Mary Kathleen Rose (www.comforttouch.com) is a licensed massage therapist, health educator, and author of several books, including *Comfort Touch of the Hands & Feet: A Guide for Family Caregivers*.

Slowing Down for Self-Care



by Annemarie Prairie, MA, LPC, CACIII

As a child I thought it was strange that the flight attendants instructed passengers to put their oxygen masks on before assisting children. I was worried that I would pass out long before my mom could get one on me. She was so busy; I don't have memories of her slowing

down and taking care of herself first. Even now, at age 77, she has a full schedule of commitments that she would gladly tell you about if she wasn't so busy. I was well into my adult years before I began to really grasp the terms *self-care* and *boundaries*. As a parent and caregiver, I have had to understand that taking care of myself first benefits my family and me the most.

This is an ongoing conversation between my husband and me. He has been caregiving for a parent for the past two years; first it was his mom and soon after she passed it became his dad. Like most family caregivers, this is not his full-time job. Besides his full-time job, he has relationship and life commitments akin to most caregivers. He seems to be in a jigsaw puzzle of sorts—putting pieces of his life together, while making space for the activities that nurture him and keep him healthy. For my husband, these pieces are yoga, hiking, reading, gardening, and laying in his hammock. We all have things that help nurture and center us. They may change during our lifetime as our interests change, but they are always there. Many Americans have never given a conscious thought to these activities and do them infrequently or don't do them because they do not realize how vital these are to our well-being.

For many of the clients I see, it is work to slow down. As family caregivers, many of these people expend exorbitant amounts of energy focused on their loved ones—wanting to make sure that all their needs are met. This is a beautiful and loving gesture, but it is not often sustainable. I have heard many people confess in one of the grief groups I facilitate that though they feel a sense of guilt admitting it, they felt relieved when their loved one passed. This sense of relief is common and normal. It is often layered, because on one level the caregivers are no longer watching their loved ones suffer, and on another level, they feel a huge weight has lifted as their very difficult role of caregiver has ended.

(continued on page 12)



COMMUNITY RESOURCES

This column provides information about events and classes, services, and other resources of interest to family caregivers in Boulder County. Please remember that it is each person's right and responsibility to research a service provider or event before taking action. See "Information and Assistance in Boulder County" on the back page for ways to learn more about these and other resources. (To share information about a resource for family caregivers, email InfoCaregiver@bouldercounty.org or call 303-678-6116. The deadline for the November/December 2016 issue is September 23.)

Medicare Counselors with Boulder County Area Agency on Aging hold **Medicare Basics Classes** for anyone wanting to learn more about enrollment, benefits, costs, and choices under Medicare, on Thursdays, September 1 and October 6, 2 – 4 p.m., at East Boulder Senior Center, 5660 Sioux Drive, Boulder (call 303-441-1546 to register); on Mondays, September 19 and October 25, 10 a.m. – 12 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont (call 303-651-8411 to register); and on Wednesday, September 21, 1:30 – 3:30 p.m., at Louisville Senior Center, 900 W. Via Appia, Louisville (call 303-666-7400 to register). There is no charge, but donations are appreciated.

Boulder County Area Agency on Aging and Weld County Area Agency on Aging jointly offer **Powerful Tools for Caregivers**, a 15-hour course that gives family caregivers the tools to help them take care of themselves, reduce their stress, communicate effectively, and thrive—not just survive—while caring for older loved ones, on Wednesdays, September 7 – October 12, 1 – 3:30 p.m., in Erie. Boulder County Area Agency on Aging also offers **National Caregiver**

Training Program, an 18-hour course, taught by a registered nurse, that helps family caregivers acquire skills needed to provide safe, confident home care for frail older loved ones, on Thursdays, October 13 – November 17, 2 – 5 p.m., in Boulder. **Powerful Tools for Caregivers** is open to Boulder County and Weld County residents; **National Caregiver Training Program** is open only to Boulder County residents. There is no charge, but donations are appreciated. Financial assistance for respite care (substitute elder care during class periods) is available. Pre-registration is required, at 303-678-6116 or InfoCaregiver@bouldercounty.org.

Alzheimer's Association Colorado Chapter offers these programs for people with early memory loss and their care partners: **Memory Café**, a welcoming gathering place for coffee, socializing, and an activity, on Mondays, September 12 and October 3, 10 – 11:30 a.m., at Louisville Recreation Center, 900 W. Via Appia Way, Louisville; **Nature Hike**, a guided exploration of nature, on Tuesday, October 10, 10 a.m. – 12 p.m. (location to be announced); and a **SPARK! cultural program**, on Sunday, September 11, 2 – 3:30 p.m., at Boulder Museum of Natural History, 1030 Broadway, Boulder. For more information and to register, call 303-813-1669 or email Kera at kmagarill@alz.org.

Louisville Senior Center offers a **Wellness and Resource Fair**, with loads of resources and information, on Friday, October 7, 9 – 11 a.m., at 900 W. Via Appia, Louisville.

Alzheimer's Association Colorado Chapter presents **Know the 10 Signs: Early Detection Matters, in Spanish**, on Wednesday, September 7, 10 a.m. – 12 p.m., and **in English**, on Friday, October 7, 9 – 10:30 a.m., at Longmont Senior



Center, 910 Longs Peak Avenue, Longmont; **Effective Communication Strategies**, on Thursday, September 8, 3 – 5 p.m., at Kaiser Permanente Rock Creek Clinic (Aspen Creek 1 Room), 280 Exempla Circle, Lafayette, and on Tuesday, October 18, 2 – 4 p.m., at Kaiser Permanente Longmont Clinic (Longs Peak Room), 2345 Bent Way, Longmont; **Healthy Living for Your Brain and Body: Tips from the Latest Research, in Spanish**, on Tuesday, October 4, 2 – 4 p.m., at West Boulder Senior Center, 909 Arapahoe Avenue, Boulder; **The Basics: Memory Loss, Dementia and Alzheimer's**, on Thursday, October 6, 1 – 3 p.m., at West Boulder Senior Center (see above); and **Understanding and Responding to Dementia-Related Behaviors**, on Thursday, October 20, 3 – 5 p.m., at Atria Senior Living, 2310 9th Avenue, Longmont. Pre-registration is required, at 800-272-3900. Class descriptions are available at www.alz.org/co (Classes and Workshops).

The Conversation Project in Boulder focuses on helping families engage in meaningful conversations around end-of-life care. Services, education, and coaching are all free. Contact Phyllis Colette, JD (Director) at 303-442-0436, ext. 133, or email Phyllis@theconversationprojectinboulder.org. The website for more information is www.theconversationprojectinboulder.org.

The Alzheimer's Association is pleased to announce the hiring of the first full-time **Boulder County Coordinator**, Ralph Patrick. Ralph will lead the Association's care and support service in Boulder County, including spearheading support groups, education and training, care consultation with families, and more.

You Can Become a Savvy Caregiver, a 6-week course that teaches an understanding of dementia and strives to increase caregiver confidence

while reducing the adverse effects of caregiving, led by gerontologist Jessica O'Leary, MA, CVW, is on Wednesdays, September 7 – October 12, 6 – 8 pm., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. The course is open to persons caring for a loved one with early- or mid-stage dementia; it is not for professional caregivers. Attendance at all classes is required, and class size is limited. There is no charge, but pre-registration is required, at 303-651-8411.

During **Fall Prevention Week**, September 19 – 23, educational events about reducing the risk of falling will be held throughout the county. See the full schedule at www.bouldercountyfallsprevention.org.

Boulder County Area Agency on Aging offers **Matter of Balance**, an 8-week health education class designed to help people reduce their fear of falling and increase their physical activity levels, on Mondays, September 26 – November 14, 1 – 3 p.m., at West Boulder Senior Center, 909 Arapahoe Avenue, Boulder; on Tuesdays, September 27 – November 15, 1:30 – 3:30 p.m., at Louisville Senior Center, 900 W. Via Appia, Louisville; and on Thursdays, September 29 – November 17, 1 – 3 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont; **Healthier Living (Stanford University's Chronic Disease Self-Management Program)**, which teaches techniques to help change perspective and manage a chronic condition, on Thursdays, October 6 – November 10, 1:30 – 4 p.m., at Frasier Meadows, 350 Ponca Place, Boulder; and **Healthier Living with Chronic Pain**, which is similar to the program above but with added focus on dealing with chronic pain, on Wednesdays, September 21 – October 26, 5:30 – 8 p.m., at Back Joy, 6685 Gunpark Drive, #21, Boulder. The courses are free, but donations are appreciated. Pre-registration is required, at 303-441-3599 or mpruitt@bouldercounty.org.



Slowing Down for Self-Care

(continued from page 9)

Constant giving often leads to people feeling either resentful or exhausted—or both—and this can bring a host of other problems.

There are many dangers in giving without taking care of your own needs. With resentment comes anger, and some family caregivers have confessed this had led to abusive behavior. When exhaustion takes hold, it may lead to the caregiver getting sick themselves or making mistakes with medications. What can be difficult to distinguish for family caregivers is the difference between exhaustion and depression. Many caregivers I have worked with are doing the bulk of the work for months and longer and are not even aware of their feelings or needs because they are expending so much energy for their loved ones. It is important that caregivers recognize the difference between exhaustion and depression, because then they are equipped to get help for themselves. Exhaustion is a common “side effect” of caregiving and can be marked by:

- Fatigue; feeling tired, drained, and depleted
- Difficulty concentrating or thinking clearly; forgetting things
- Insomnia (either having trouble falling asleep or staying asleep)
- Loss of appetite
- Anxiety (mild)
- Increased illness (lower immune function)
- Anger and irritability
- Depression (mild)

The appearance of any or all of these is a warning sign that you need to slow down and rest. If not, these symptoms will likely increase and lead to burnout. One symptom that can be misconstrued as exhaustion is depression. It is normal with exhaustion to experience some feelings of hopelessness, guilt, and worthlessness, but if these feelings increase and/or worsen it is important to get professional help. Signs that you should get help include:

- Excessive sleeping
- Loss of interest in pleasurable activities
- Overeating or appetite loss
- Physical pains like cramps, headaches, digestive pain
- Persistent sad or anxious feelings, or suicidal thoughts

Family caregiving is a huge undertaking and should be done thoughtfully. Often people take on more than they can sustain because they do not pause to assess what is feasible and what is too much. In our “busy” culture, it is uncommon for us to slow down and really take the time to decide what we can handle and what we need extra support around. But it is vital that we take our role as caregivers as seriously as we would any other job. Here are some things to consider in slowing down the pace.

- Think about how you can slow down. Ask yourself how many hours is feasible each week and how many are too much. How can you stick to a certain amount of hours? Who can you ask for support? And do ask for support; you cannot do this all on your own.
- Are you treating yourself like you would your best friend (i.e., what advice would you give someone in your shoes, and are you taking that advice)?
- Are you doing activities that support you (caregiver support groups, lunch or walk with a friend, exercise, quiet time)?
- What is your self-talk? Are you telling yourself that you’re not enough? That you should be doing more? Remind yourself that no one is perfect and that you are doing the best you can.
- Are you comparing yourself to anyone else? Create your own path, one that will work for you.
- Is there someone you trust with whom you can talk through the difficult emotions? Getting these out can be a huge tension releaser and can limit angry outbursts.

Finally remember that this is a temporary role and *make a commitment to yourself to slow down and breathe throughout each day.* When you

make a mistake, forgive yourself. When your self-talk becomes negative, notice it, pause, and come back into the present moment by stopping the mind chatter and focusing on your breath. “Putting your oxygen mask on first” will better allow you to help your loved one from your heart rather than from a place of depletion and resentment. This is a practice and will take some time, but if you make a commitment to you and to slowing down, you will be a more sane and sustainable caregiver.

Annemarie Prairie, MA, LPC, CACIII, is a psychotherapist with a private practice in Boulder. She also co-facilitates grief groups for hospice and works with seniors experiencing homelessness in Denver.



Book Review: *Living in the Land of Limbo*
by Claudia J. Helade, Ph.D.

Living in the Land of Limbo: Fiction and Poetry about Family Caregiving is an unusual book compiled and edited by Carol Levine and authored by many poets and writers, some known and acclaimed and others heretofore unpublished. It powerfully captures the heart and emotional territory of caregiving—both family and professional—and stands apart from the other books written on the topic of caregiving in its ability, through the voices and talents of many writers, to illustrate the often poignant, complicated, and sometimes humorous situations encountered by those whose care shepherds loved ones in the land of limbo. It offers no directives or advice, simply a refreshing and welcome path to the heart. This book is genuine art and as such accesses the deepest and most profound of human emotions.

The care of husbands and wives, children, parents, friends, and lovers who are facing chronic illness and death is articulated in such a way that any who read *In the Land of Limbo* will find mirrors for their experiences and feelings as they

navigate the uncertain seas of caring for those with dementia, HIV/AIDS, MS, cancer, mental illness, old age and more. The healthcare system and the consequences of its impacts are illustrated with vivid prose and will deeply resonate with caregivers in similar situations.

Living in the Land of Limbo may be read in increments, which is helpful for those whose time may be limited, and each story or poem asks for reflection and the opportunity to weave it into the heart’s perspective. The book is organized into five sections based on the relationship of the caregiver to the one needing care. The variety of the writing gives voice to universal human experiences of grief, sorrow, hope, and love. The fictional format invites a more intimate and powerful reading for one who is treading the water of caregiving, as well as for professionals in the areas of healthcare, social work, aging, and psychology.

Levine writes that the land of limbo in which caregivers find themselves, often for years, can be described as tedium interrupted by crisis. Each of the poems and stories in this book illuminates this uncertain land in ways that readers will find empathetic, accurate, and often startling in their impact. The reader surprisingly feels genuinely seen and received by the many voices given expression here.

Living in the Land of Limbo is a gem of a book and will act as a buoy in the sea of loving service. It stays with one as a beacon in the ongoing challenges and uncertainties of what the task of caregiving requires. Readers will recognize themselves in the mirror of its prose and will not leave its pages the same as when they started, just as they are forever changed by the limbo of caregiving.

Claudia J. Helade, Ph.D., is a psychotherapist, director of Into the Center, and member of the Care Connections Editorial Advisory Committee.

CARE Connections
Boulder County Area Agency on Aging
P. O. Box 471
Boulder, CO 80306



INFORMATION AND ASSISTANCE IN BOULDER COUNTY

Within Boulder County, there are several ways to access information and assistance about resources and services for older adults and their family caregivers:

- Check out **Network of Care for Seniors and People with Disabilities**, a comprehensive online service directory, at www.BoulderCountyHelp.org
- Call the **ADRC Help Line**, at 303-441-1617, and Boulder County Area Agency on Aging staff will respond to your message.
- Call the **resource specialist** in your community (numbers below). Services vary by community but include identifying needs, exploring options, finding solutions, and providing in-depth assistance.

Allenspark area	303-747-2592
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City of Lafayette	303-661-1499
City of Longmont	303-774-4372/303-651-8716 (bilingüe)
City of Louisville	303-335-4919
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