

CAREConnections

Information and Inspiration for Caregivers

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My Challenges, My Growth

Dear Caregiver,

This issue is a bit of a “potluck,” filled with articles that couldn't squeeze into earlier issues, plus a couple written just for this issue. The issue's theme, loosely, is dealing with and growing from difficult experiences. We start on this page with an article that helps us find ways to get beyond the pain to the light within—invaluable for caregivers who deal with their own pain, and probably their loved one's, every day.

We hope you'll get something out of this issue ... something that helps a little as you face the challenges in your own life as a caregiver. Even the hardest times in caregiving have their gifts.

Take care.

The Editors



Turning on the Light: Meeting Life's Challenges with Grace

by *Claudia Helade, Ph.D.*

“Happiness can be found even in the darkest of times, when one only remembers to turn on the Light!” This wise and hopeful message from one of the popular Harry Potter movies reminds us of the positive opportunities available in the midst of a dark and challenging time. We can expand our awareness and burnish our character by countering with compassion and grace the difficulties that life presents to all of us—if only we remember that we can always “turn on the Light.”

What is this “Light” to which we are referring? Light is the clarity and deep confidence accompanying connection to our authentic, pre-aculturated self, our unique essence. The light emerges from our center—the still point in the middle of the chaos of everyday consciousness where peacefulness and awareness of our deepest truth is held, our intuition and imagination, our heart. This Light is best revealed when we decline to judge our circumstances or compare our lives with others', understanding that every life entertains suffering and joy as well as the difficulties which offer access to more expansive and compassionate states of being. Loving, or at least accepting with equanimity, that which we are given to accomplish, reflects the Light



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Care Connections

Boulder County Area Agency

on Aging

P. O. Box 471

Boulder, CO 80306

303-678-6116 (ph)

303-678-6285 (fax)

InfoCaregiver@bouldercounty.org

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Editorial Advisory Committee

Emily Cooper

Susan Damon

Claudia Helade

Lynn Malkinson

Mary Kathleen Rose

Newsletter Design

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Newport, Oregon

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we are. In the depths of sorrow and exhaustion we often forget that we can change how we experience our circumstances no matter how difficult or apparently intractable they seem. We learn that we can generate a sense of spaciousness and good will to feed and sustain the evolving situation.

The challenges of caregiving can often feel overwhelming and isolating. Thoughts of “Why me?” or “I can’t believe this is happening to me” can lead to a sense of defeat, hopelessness, and victimization, limiting even our most noble and competent aspirations as caregivers. These feelings are a normal part of the caregiving journey from time to time, but when they are pervasive and seriously interfere with our sense of fundamental well-being, we can choose to explore our thoughts and feelings to transform the dark and difficult into opportunity and beauty. The work of self-knowledge is necessary to begin. The way out is the way in.

Most of us have heard at least one of the many “good news/bad news” stories illustrating that in the middle of a situation it is difficult or impossible to accurately evaluate the meaning of our experience. It is tempting to judge and assign either “good” (like) or “bad” (dislike) to our experience of caregiving (or any other situation), which consequently informs our responses. Regardless of which perspective we choose, the same event or happening can be perceived either way. We choose how we perceive it. At a deep level, there is no good or bad—simply what is and our choice of how to respond to it. As the Persian mystic poet Rumi wrote, “Out beyond ideas of right and wrong there is a field. I will meet you there.” In this place, let us take a look at our circumstances from the perspective of our most expanded capacity—our Light. Following are several practices which can reduce much stress and create bridges to more peaceful and effective caregiving, allowing softening and surrender to work their magic.

Be Present. Stay conscious and in the moment. Focus solely on what you are doing right now. As a simple example, if you are peeling potatoes, completely immerse yourself in the totality of the experience of the potato: its colors, imperfections, texture, moisture, and how it feels in your hands. Notice completely all the potato-ness in the moment as well as how you feel as you handle the potato. Appreciate the moment and stay in it. This applies to changing bedpans, tucking a loved one into bed after a long and stressful day, or cooking dinner for a picky eater. Just be present, notice without judgment, and stay open to what wants to become known.

Visualize yourself as the hub of a wheel. Consciously and deliberately calibrate your desired mental and emotional state and center yourself there. This reduces fear and helps especially when you are feeling stressed in any circumstance. This image enables your innate wisdom to be an effective agent. Here is where the choice comes in. You have a choice—about you.

Accept the situation as it is. Resistance causes unnecessary stress and unhappiness. Attempts to control what cannot be controlled are ineffective and painful. Acceptance creates freedom and allows love to surface. Remember the healing of humor. Experiment—try it.

Slow down. Breathe deeply and renew what needs your attention and love. It could be you.

Be aware of what triggers your fear and stress. Then follow the above suggestions to anticipate and de-escalate ineffective responses. Check in with yourself often, become aware of what you are feeling, and investigate. Amazing self-awareness is available here.

Cultivate wonder and enjoy simple beauty. The song of a bird, the shapes of clouds, the glimpse of a beloved friend, the laugh of a child, all the colors, and the starry skies overhead provide comfort, belonging, and the long view that is so essential for having a healing perspective. We are not alone, and wonder connects us with what matters and our place in the scheme of things. Seek beauty in everything, everyone, and every happening. You will find it, guaranteed.

Remember the above. If you are distracted, slow down, breathe deeply, and remember what you are doing and what it means to you and to the one for whom you care. Turn on the Light and let go of what is unimportant and hinders connection.

Self-care is essential. Care for yourself with as much love and understanding as you give to others. You are worthy of the utmost consideration and respect. Give it to yourself first, or you cannot pass it on.

Remember that everything is always changing. We cannot stop the wheel or slow the forward movement of all that exists. The way of the universe is constant change. This situation will not last forever; all the more reason to treasure the present moment, no matter how difficult it is.

Trust your deepest instincts and trust the wisdom inherent in the situation. Often it is only after the fact that the whole or even partial meaning of a trial becomes known, and only then can we hope to apprehend the full beauty we have helped to birth with another—the costs and the rewards.

Give thanks. Gratitude is the sacred ground of those who can evaluate their circumstances from the perspective of their highest self, their Light. There may be times when this is difficult, so take the time daily to remind yourself of what you are grateful for—the best mood elevator ever.

Share as many of your insights from the above as you can with the one for whom you care – without expectation or judgment. This sharing is bonding and inspiring, offering permission for the care recipient to deepen his or her experience of life as well. New skills and awareness are always available, and it can sometimes surprise us to discover the Light shining where it is not expected. Everyone's Light searches for what has heart and meaning, even when outer demonstration is dimmed.

I know of few more effective ways to polish character and build strength, skills, and compassion than to surrender to the service of a need. There are no victims in this scenario. Caregiver and care recipient join together to offer the maximum growth, awareness, and opportunity to each other. In this play, the roles are different, but the goal is the same: to stay present with the experience and to give and receive what is possible to create together. The caregiver learns new ways of perception, the



satisfaction of being a vehicle for what is most wanted in a “time of need,” and so much more. Each role is essential for the play to conclude with the gift of deep meaning and beauty.

One of my favorite philosophers, J.G. Bennett, said that the fruit of sacrifice is freedom—no less than the possibility of a creative act. Within the many sacrifices called for when caring for a loved one are the surprise, pain, and joy of one of the deepest of human experiences. The value of what we give is linked inextricably with the quality of the presence we bring to another—less to do with doing, and more to do with being. The true gift of caregiving is the possibility of a creative act, a task completed with presence, caring, and love. It is noble work, full of the whole of the human experience: bittersweet, exhausting, exhilarating, dark, precious, sometimes humorous, and ultimately fleeting. True completion lies with being fully present, and therein lies the Light. Remember to turn it on!

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



Book Review: *Necessary Losses*

by Lynn Malkinson

Before starting a student internship at hospice in 1988, my supervisor had me read *Necessary Losses*, by Judith Viorst. I knew the author’s poetry from “ladies” magazines and wondered how her book could help me understand how people fare at the end of their lives. I couldn’t put it down.

Now, 27 years later, I picked it up again and couldn’t put it down. Viorst writes with that winning combination of reading ease, thought provoking content, and scholarly references.

Her subject is relevant for a hospice social worker, for caregivers, for anybody.

As she writes about love, loss, and letting go, we learn why the normal, expected transitions of life affect us so deeply—or affect us so little. Starting with the earliest of human losses, our expulsion from the womb into the world, she moves us through our lives, as we merge with and separate from people, places, things, and states of being.

Viorst writes about child development and the repeated weanings that move us from one phase to another as we age. She talks about love and loss of love and why it hurts so much; she talks about marriage, children, friendship, growing old, and dying. She suggests that the cycle of bonding, separation, and reconnection makes us grow. This happens over and over and appears to be necessary, because without it we don’t grow. We don’t even stay the same; we shrink.

Here is the last paragraph of her book:

“As for our losses and gains, we have seen how often they are inextricably mixed. There is plenty we have to give up in order to grow. For we cannot deeply love anything without becoming vulnerable to loss. And we cannot become separate people without some losing and leaving and letting go.”

Lynn Malkinson is a retired hospice social worker and a member of the Care Connections Editorial Advisory Committee.

**“There are no classes in life for beginners;
right away you are always asked
to deal with what is most difficult.”**

— *Rainer Maria Rilke*

VISIT WITH A CAREGIVER

When Sarah realized she was having some memory loss, she “took the bull by the horns” and decided to get a memory evaluation. She acted as a wise caregiver—for herself.

Care Connections: What prompted you to seek a memory assessment?

Sarah: After my last annual checkup, my primary doctor suggested I see a neurologist to check my level of memory loss. After some simple tests, the neurologist told me about a day-long assessment in Denver that could give me more detailed information. I’m curious about myself and was interested in finding out as much as I could about my forgetfulness. Also, I was pleased that my insurance would cover the cost.

CC: What was the assessment like?

Sarah: The test took six hours, from 9 to 4 with an hour lunch break. It started with a brief joint interview with my partner and me to find out what he had noticed about my forgetfulness. The rest of the test was long: some of it was easy, some hard. I had to look at geometrical shapes and reproduce them on paper. I read several paragraphs and answered questions about them. Also, I was asked to recount number sequences and to work with a clock drawing. It’s hard to remember every part of the test.

CC: Was this a positive or negative experience?

Sarah: I was disturbed by it and somewhat shocked about how bad my memory was.

CC: Would you recommend this test to someone concerned about forgetfulness?

Sarah: I’d say, go and get all your data checked. It’s a baseline for future reference.

CC: Were the results helpful to you and your partner?

Sarah: Yes. The information had value to me and to my partner. I knew my memory was starting to have holes in it, and this was confirmed by the neurologist. I had noticed that my spelling was gone. I had been a perfect speller; now there are tons of words I can’t spell. I forget appointments if I don’t keep a calendar and must check for keys, wallet, and bus pass every time I leave the house.

CC: That sounds pretty normal.

Sarah: More alarming was that sometimes I forget how to put on a particular garment; I get a blouse on the wrong way or I might look at a familiar object like a snorkel and find it takes a while to figure out how to put it on. I’ve been observing these things and taking note of them. Spelling was the first strong indicator. All of this is against the baseline of how I’ve always experienced myself. Because such a test exists, I know I’m not the only one. This is a big issue for tons of people.

CC: How has your life changed as a result of this test?

Sarah: After the test, the neurologist gave me information about self-help with memory. My partner was ready to help. He said, “We can start playing Scrabble tonight!” I played reluctantly, and we tied. He suggested other memory games, and I said I don’t want to play memory games. I’m going on doing what I want to do, the work I love to do, so leave me alone. He got it. He’s sweet. I’m grateful I have a partner who is helping me weather this change in my life. We’re both struggling with changes in everything associated with health, with aging.

CC: Thank you, Sarah.

Interview conducted by Lynn Malkinson.





Five Years Later

by Emily Cooper

My mom died a little over five years ago, at 97, in a hospital three blocks from her home in a small Kansas town, with her children at her bedside. After all the questions, concerns, and efforts of being her long-distance caregiver for many years, when she died I immediately felt a great sense of relief—mostly for her. She was *done*. Later, other emotions set in, of course. I've gone through the natural grief of losing my mother. And, as time has passed, I've looked back on my caregiving and thought about what I would and wouldn't do differently, if I had to do it over again. Here's what I've decided.

What I would change ...

I'd be more honest about the toll that caring for my mother took on me. Mom was insistent about staying at home, in spite of feeling isolated and lonely, but keeping her there meant that I made a ten-hour drive to be with her for several days every month. All those trips were exhausting, and I think it would have been fair to say, "Mom, I want to do what I reasonably can to help you stay at home, but this has become too much for me."

I would have communicated more clearly with my brother, who was Mom's local and thus primary caregiver. We had virtually no relationship before we became co-caregivers, so learning to communicate at all was daunting. Partly because of that, in our conversations I often settled for not knowing what he was saying, or what we both were going to do, or how we each felt about something. If I'd pushed a little harder for clarity, we might have had fewer misunderstandings.

I wish I had asked for more help from my sister, who also lives here in Colorado. She and Mom weren't close, and she was caring for a son with health problems, so I didn't question her doing less to help Mom than my brother or I. Yet, when Mom fell and broke her hip, and I was frantically

trying to figure out how to care for her, I called my sister and said, "I can't do this alone. I need you to come here to help." Much to her credit, she immediately answered, "I'll be there." Finally telling her that I needed her support meant that she was present when Mom died a short time later—a good thing for my sister, for me, and for our mother.

I would have taken more time for myself when I visited Mom. Those trips were always action-packed, with *so* many things to do, and I was on the run from the moment I got up to the time I dragged myself to bed. And Mom, who was so glad to have my company and attention, was happy to have me glued to her side every minute. It was too much. I wish I'd forced myself to take a little time each day to get away for a breather—to create some needed space.

What I wouldn't do differently ...

I can look back at numerous things in my life and wish I had done them differently, or not done them at all, but one thing I'm unreservedly proud of is caring for my mom with love. We had some rough patches in our life together, but when she needed my care I chose to give her my best. Of course I loved her, but it wasn't about that. It was about *being* love with her, even at times when I didn't particularly like her. Caring for Mom allowed me to be love in action, and I learned and grew so much from that.

I often said "thanks" to Mom's paid caregivers, who were there with her day in and day out. They were far from perfect and did things differently than I would have, but they were caring and fun, and they became important people in Mom's life. As former friends stopped coming by, those caregivers turned into Mom's closest companions.

I often thanked my brother too. He'd always been the "difficult" one in our family, in and out

(continued on page 7)



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Five Years Later (continued from page 6)

of trouble, but Mom adored him. And I was impressed by the way he stepped up to take care of her. Though my communication with him was challenging, I always tried to say “thank you” for everything he did.

I’m glad I spent time just sitting by Mom, holding her hand, tucking her into bed, shampooing her hair, giving her hugs and kisses—the personal things. There were many other things that I could have been doing, but her eyes always said, “Please, stop, sit here, touch me.” Those were the sweetest times and the memories that give me comfort. Often, now, I remember a particular moment in the final days of her life when she looked up at me so lovingly from her hospital bed as I leaned down to kiss her forehead. The memory of that moment is a gift.

What a trip it was—long, hard, beautiful, real. I’m so relieved to be done with the journey, but I’m so very glad I took it.

Emily Cooper is Information and Referral Specialist – Caregiver Programs and Editor of Care Connections for Boulder County Area Agency on Aging.



Loss, Grief, and Acceptance: Stages of Caring for a Loved One with Alzheimer’s

by Sara Spaulding

It is common for caregivers to have feelings of loss and grief as their life is changed by Alzheimer’s [or other form of dementia]. The loved one with Alzheimer’s gradually seems to disappear. As this happens, individuals and families mourn the loss and experience the different phases of grieving—denial, anger, guilt, sadness, and acceptance—in spite of the fact that the person hasn’t actually died. The stages of

grief also don’t happen neatly in order. A grieving caregiver may move in and out of different stages as time goes on. The process may also repeat itself once the person with Alzheimer’s does die.

Some common experiences in the grieving process include:

Denial

- Hoping that the person is not ill
- Expecting the person to get better
- Being convinced that the person hasn’t changed
- Attempting to normalize problematic behaviors

Anger

- Being frustrated with the person
- Resenting the demands of caregiving
- Resenting family members who cannot or will not help provide care
- Feeling abandoned and resenting it

Guilt

- Wondering what caused the illness and whether it could have been prevented by doing something differently
- Regretting interactions after the diagnosis
- Feeling bad about taking a break
- Feeling like a failure (for example, when having to place a loved one in a care facility)
- Having negative thoughts about the person or wishing that he or she would go away or die
- Regretting things about the relationship before the diagnosis
- Having unrealistic expectations with thoughts such as “should have done...,” “must do everything,” or “must visit every day”

Sadness

- Feeling despair or depression
- Withdrawing from social activities
- Withholding emotions

(continued on page 10)



COMMUNITY RESOURCES

This column provides information about events and classes, services, and other resources that may be 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 September/October 2015 issue is July 27.)

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, July 2 or August 6, 2-4 p.m., at East Boulder Senior Center, 5660 Sioux Drive (call 303-441-1546 to register); Mondays, July 20 and August 17, 10 a.m. – 12 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont (call 303-651-8411 to register); and Friday, August 21, 1:30 – 3:30 p.m., at Lafayette GO Services, 103 S. Iowa, Lafayette (call 303-665-9052 to register). There is no charge, but donations are appreciated.

Alzheimer's Association Colorado Chapter sponsors numerous classes for dementia caregivers: **Living with Alzheimer's, Middle Stage – For Caregivers (2 part series)**, on Thursdays, July 9 and July 16, 1 – 4 p.m., at Broomfield Community Center, 280 Spader Way, Broomfield; **The Basics: Memory Loss, Dementia and Alzheimer's**, on Sunday July 19, 2 – 4 p.m., at Mesa Vista of Boulder, 2121 Mesa Drive, Boulder; **Know the 10 Signs: Early Detection Matters**, on Monday, August 3, 9 – 11 a.m., at Longmont Senior Center, 910 Longs Peak

Avenue, Longmont; **Healthy Habits for a Healthier You**, on Wednesday, August 5, 2 – 4 p.m., at East Boulder Senior Center, 5660 Sioux Drive, Boulder; **Living with Alzheimer's, Late Stage – For Caregivers (2 part series)**, on Thursdays, August 13 and August 20, 1 – 4 p.m., at Broomfield Community Center (address above); **Legal and Financial Planning for Alzheimer's**, on Sunday, August 16, 1:30 – 4:30 p.m., at Boulder Public Library, 1001 Arapahoe Avenue, Boulder; and **The Basics: Memory Loss, Dementia and Alzheimer's**, on Monday, August 24, 5 – 7 p.m. (in English), or on Monday, August 31, 5 – 7 p.m. (in Spanish), at Lafayette GO Services, 103 S. Iowa, Lafayette (call 303-661-1492 to register for either of these). Get more information or register at 1-800-272-3900 or www.alz.org/co (unless otherwise noted above).

AgeWell, a service of Longmont United Hospital, offers **Advance Directives workshops**, about considering and clarifying one's wishes for medical treatment in the event of incapacitation, with Program Coordinator Peggy Arnold, MA, on Thursdays, July 9 or August 13, 9:30 – 11 a.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. Pre-registration is required; call 303-651-8411. There is a \$5 fee for Longmont residents, \$6 for non-residents.

Caring for Your Aging Parent, a new drop-in support group for adult children caring for aging parents, meets on the second Thursday of each month, 5:30 – 7 p.m., at East Boulder Senior Center, 5660 Sioux Drive, Boulder. The group is facilitated by Andrew Bunin, LPC, and Jodi Ansell, MSW, and is free and open to Boulder County residents. For more information, contact Jodi at 303-415-1025 or jansell@jewishfamilyservice.org. This group is

co-sponsored by Boulder County Area Agency on Aging, City of Boulder Human Services, and Jewish Family Service.

The annual **Boulder County Senior Law Day**, an event for seniors, family and friends, and caregivers, is on Saturday, August 22, at the Plaza Convention Center, 1850 Industrial Circle, in Longmont. Doors open at 8 a.m., the keynote address by District Attorney Stan Garnett is at 9 a.m., and the day ends at 3 p.m. The event features 20-plus presentations on legal topics and financial, health, and mental well-being concerns, one-on-one “Ask a Lawyer” 15-minute sessions (reserve at check-in), resource fair, complimentary lunch, and a free *2015 Colorado Senior Law Handbook* for each attendee. Admission is \$10 per person (scholarships are available upon request). Pre-registration is required, at www.seniorlawday.org (click on “Boulder County”) or 303-441-1685.

You Can Become a Savvy Caregiver, a course for family caregivers of persons with dementia (Alzheimer’s or another form), is on Wednesdays, September 9 – October 14, 6 – 8 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. This training program provides caregivers with a better understanding of dementia, increases their caregiving skills and knowledge, and helps them learn how to manage and care for themselves day to day. It is taught by Jessica O’Leary, MA, CVW, a gerontologist and specialist in dementia. Attendance at all classes is required (barring emergencies); class size is limited. A donation of \$15 to cover materials is requested. Registration opens August 17, at 303-651-8411.

Boulder County Area Agency on Aging offers the **National Caregiver Training Program**, a 21-hour course (meets once a week for 3 hours), 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, September 17 – October 29, 1:30 – 4:30 p.m., in Boulder; and **Powerful Tools for Caregivers**, a 15-hour course (meets once a week for 2 ½ hours) that gives family caregivers the “tools” to manage stress and take care of themselves while caring for older loved ones, on Wednesdays, September 23 – October 28, 1:30 – 4 p.m., in Boulder. There is no charge for either course, but donations are appreciated. Financial assistance for respite care (substitute elder care during class sessions) is available. For more information or to register, call 303-678-6116 or email InfoCaregiver@bouldercounty.org.

TRU Community Care once again offers its **Step by Step Boulder Hiking Group**, which provides a safe place to get some gentle exercise and have a quiet time with supportive companions, for caregivers or those who have experienced a death loss, on Wednesdays through September, meeting at 5:30 p.m. at Boulder Montessori School, 3300 Redstone Road, Boulder. To register, contact Julie Thomas, 303-604-5213. For additional information, call TRU’s Grief Services at 303-604-5300 or visit www.TruCare.org.

For a complete list of **caregiver support groups** that meet in Boulder County, call 303-678-6116 or email InfoCaregiver@bouldercounty.org.

“Difficult times have helped me understand better than before how infinitely rich and beautiful life is in every way, and that so many things that one goes worrying about are of no importance whatsoever.”

— Isak Dinesen



Loss, Grief, and Acceptance: Stages of Caring for a Loved One with Alzheimer's (continued from page 7)

Acceptance

- Coming to terms with the diagnosis and with the reality that day-to-day life will eventually change
- Finding personal meaning in caring for someone who is terminally ill
- Finding pleasure by being with the person in the moment
- Seeing how the grieving process affects life
- Appreciating the personal growth that comes from surviving loss

The Alzheimer's Association recommends some tips for coping:

Face feelings. Think about positive as well as negative feelings. Be sad, work through anger and frustration. These are healthy emotions. Know that it is common to feel conflicting emotions. It's okay to feel love and anger at the same time.

Prepare to experience feelings of loss more than once. As dementia progresses, it is common to go through feelings of grief and loss again. Accept and acknowledge feelings as a normal part of the grieving process.

Own the grieving process. No two people experience grief the same way. Grief hits different people at different times; some people need more time to grieve than others. The experience will depend on the severity and duration of the person's illness, personal history of loss, and on the nature of the relationship with the person who has Alzheimer's. Everyone grieves differently and at their own pace. If the grief is so intense that the caregiver's well-being is at risk, ask for help from a doctor or a professional counselor.

Talk with someone. Talk with someone about grief, guilt, and anger. Some therapists specialize in grief counseling. Interview several to choose the right one.

Combat feelings of isolation and loneliness. Caregivers often give up enjoyable activities and companionship. Make a lunch or movie date with friends. Taking a break may help relieve stress and grief, and strengthen support networks. Stay involved in enjoyable activities.

Join a support group. Share emotions with other caregivers. Cry and laugh together. Don't limit conversations to caregiving tips. Alzheimer's Association support groups take place all across the country.

Know that some people may not understand individual grief. Most people think grief happens when someone dies. They may not know that it's possible to grieve deeply for someone who has a progressive cognitive illness.

Acceptance. Think about personal expectations. Are they realistic? Learn to accept the things that are out of reach and focus on what can be controlled and managed.

The best thing a caregiver can do for the person they are caring for is to stay healthy. This includes taking care of physical, mental, and emotional well-being. Create balance by doing things that bring joy and comfort, and take time to rest. Find ways to spend time with a loved one that keep things present. Don't worry about the laundry or other daily household chores. Focus on precious moments even if that means just sitting quietly on the couch together. The person with Alzheimer's is probably no longer able to keep track of time, but spending it with someone they know and love can bring comfort and contentment.

For help with caregiving, contact the Alzheimer's Association at 1-800-272-3900 (the 24-hour Helpline) or go online to www.alz.org/co.

Sara Spaulding, APR, was Vice President of Communications for the Alzheimer's Association Colorado Chapter when she wrote this article a few years ago.

My Challenges, My Growth

by Kaelin Kelly

For years I've known
I have a problem with boundaries
The angst of people I care about
Draws me in until
I become their angst

It's made me crash
It's made me sick
It's kept me from being the support
To help them reclaim their footing
Just when they need me most
I'm gone
Lost in a sea of fear

I've done a lot of work on this
Then you arrived to put me to the test
The ultimate test
I've tracked my own angst
Back to the womb—your womb
When the events of your life
Kept you from connecting with me
Leaving me with an emptiness
I would carry through life

It's fitting that it be you
Who tests out my healing
I'm defending my thesis
In the relationship where it all began

Your path is like the ocean
Calm one moment, stormy the next
At 7 a.m. you engage in life
At 9 a.m. you want to die
The old me would follow the waves
Rising and falling with your moods
No distance, no support
Tossed about in nausea
Instead, I hold the space

Allowing you your reality
But offering a different way
“Everything is fine in this moment, Mom.”
“I am here and you are safe.”
“I will take care of you.”

Sometimes it works
And you relax
Allowing my reassurances
To replace your inner demons

Sometimes it doesn't
You hold tight to your fears
That feel so real and threatening

Either case is okay
The choice is yours
Even as I have my own right
My responsibility
To choose to be a witness
And not a participant
To offer you a life vest
Instead of drowning with you

I don't pretend that I have licked
This problem I've dealt with all my life
But every time I hold my space
And offer you a mirror of safety
I take a step towards change
Each small success
Helps soothe my demons
And calm my soul
Perhaps permanent growth
Perhaps not
But one thing I know
This moment is surely holy

From A Caregiver's Journey: Poetry
by Kaelin Kelly. Kaelin is a Boulder
County resident.



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
City of Boulder	303-441-4388 (bilingüe: 303-441-3918)
City of Lafayette	303-665-9052, ext. 2
City of Longmont	303-651-8716 (bilingüe), 303-774-4372
City of Louisville	303-335-4919
Erie	303-926-2795
Lyons area	303-823-9016
Nederland area	303-258-3068
Niwot area	303-652-3850
Superior	303-441-1617

