CAREConnections Information and Inspiration for Caregivers

A Publication of Boulder County Area Agency on Aging

Nov/Dec 2016

INSIDE

l Family Caregiving as

Opportunity for Growth

4 Positive Aftereffects of Caregiving

6

Modeling Caregiving for Children

> **7** Caring for Dad

8

Calmer Waters: The Caregiver's Journey Through Alzheimer's and Dementia

9

One Last Chance to Heal

10 Community Resources

13 In the Wee Hours of Christmas Eve

Dear Caregiver,

November is National Family Caregivers Month, the officially designated time for celebrating our nation's 90 million family caregivers. That number is according to Caregiver Action Network, the founder of National Family Caregivers Month. It includes people who are caring for older loved ones, as well as parents of children with disabilities and grandparents raising grandchildren. It's a huge, diverse group, and each person in it deserves to be recognized and applauded. Here in Boulder County, we're especially proud of the thousands of local caregivers who make a big difference for their loved ones every day.

The theme of this issue is "Caregiving as Opportunity." We can all appreciate the value of taking care of a loved one who needs our help, but it may be more difficult to see the opportunities provided in caregiving—especially while we're in the middle of it. Caregiving may offer many opportunities: to grow as a wiser and more loving person, to learn new skills, to discover community resources that may be helpful as *you* grow older, to share your knowledge with beginning caregivers, to heal family rifts, and so much more. It's a cliché that we learn the most during difficult times—but it's probably true. Challenging situations force us to dig deep, and that's where we find the real jewels within ourselves.

Happy National Family Caregivers Month to you. And may you feel not only that you're doing good and important work, but that you're receiving lots of "jewels" in return. You deserve it!

The Editors



Family Caregiving as Opportunity for Growth by Avery McKenzie, MA, SPT, LPCC

T he increase in the overall age of our population has far reaching impact on family dynamics, and on what the aging process entails. The U.S. Census Bureau reports that by 2050, the nation's elderly population will more than double to 88 million, and the more frail, over-85 population will quadruple to 19 million. This dramatic growth will require an increase in care facilities, outpatient care support structures, and informal familial care. And according to Richard Suzman and John Beard ("Changing Role of the Family," Global Health & Aging, National Institute on Aging, October 2011), for the first time

CAREConnections

is published six times a year by Boulder County Area Agency on Aging (BCAAA). To subscribe or respond to articles, contact:

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

Care Connections is offered free to residents of Boulder County, though donations are gratefully accepted. Agencies, businesses, and professionals are encouraged to donate to Care Connections in an effort to keep it available at no cost to caregivers. Subscriptions to addresses outside of Boulder County may be obtained by a onetime donation of \$10.00.

Care Connections is supported in large part by the ads of local agencies and businesses. For information on advertising, call 303-678-6116. Ads, while appreciated, do not constitute specific endorsement by Boulder County Area Agency on Aging.

Editorial Advisory Committee

Barbra Cohn Emily Cooper Susan Damon Claudia Helade Lynn Malkinson Mary Kathleen Rose

Newsletter Design

StudioBlue West, Newport, Oregon

Reproduction of Care Connections articles is permitted with credit to Boulder County Area Agency on Aging. in history there are more adult children in their 50s and 60s with surviving parents and more younger generations having contact with their grandparents and great-grandparents. The increase in life expectancy brings with it new opportunities for growth, healing, and connection in intergenerational relationships, and I'd like to focus on how these things can come through family caregiving. How might supporting our loved one through (often challenging) mental, physical, and emotional changes impact our relationships? How might this process influence the roles we play in one another's lives? It is an understatement to say that witnessing the changes in our loved ones that occur with aging can be painful, sad, distressing, and anxiety provoking. The host of emotions that accompany this process can run the gamut, from periods of extreme emotion to moments of numbness and denial. There is no one right way to experience the depth of coping with change in the person we love. It feels critical to focus on how we can support our loved ones while still meeting our own needs within the relationship. How can this time period be one of growth, resolution, and learning, for caregivers and for the family system as a whole? I'd like to focus on three ways that being a family caregiver provides an invitation for profound healing.

Changing Roles with the Care Recipient

As a care recipient's needs change, depending on what their diagnosis and progression may be, personality shifts often arise. This is especially true for individuals with symptoms of Alzheimer's or other dementias, or other neurodegenerative diseases. Traditional roles held in family systems over the course of the lifetime before their needs changed might get shifted significantly and suddenly as they change with their disease. For example, children might need to begin providing financial support for their parents, may be granted power of attorney to make important decisions of care, or may shift into a role of providing emotional stability when the care recipient begins having more moments of confusion or distress. These types of shifting roles can create a cornerstone for self-individuation. We can view these changes as a time of opportunity to develop our own individual journey, without others' ideas of what the perfect path "should" look like, potentially holding us back from our truest expression of self.

Some people who experience personality shifts *soften* with their increasing vulnerabilities and needs, which can allow for more honest and authentic communication than has ever been available in the relationship before. In moments where our loved ones soft-

en and their hearts feel open, caregivers may find an opportunity to broach unresolved subjects that have been taboo or felt too threatening to discuss in the past. The ability to have more direct, honest communication can allow us to express an unresolved past conflict and to strengthen the depth and trust within the relationship in the present moment. The expression of love, forgiveness, or a long-awaited apology may become possible in family caregiving situations as intimacy and closeness build.

On the other hand, it is challenging when someone we love begins to display extreme episodes of agitation when they may have been "happy-go-lucky" for the majority of their life. It's painful when they can no longer remember or recognize their loved ones, or when they lose the ability to accurately remember past events. When these challenging situations arise we have an opportunity to ask ourselves, "How can I be more compassionate in this moment, and respond in a way that I would like to be responded to if I were in that state of confusion?" We might realize and grow into the understanding that this person cannot provide the resolution we are seeking. It is up to us to let go of any existing resentment. We can learn to provide acceptance and forgiveness to ourselves, rather than needing it from our loved one anymore. Caregivers can give themselves permission to stop seeking others' approval, permission, or acceptance on a wider scale in their lives-and become more confident to create their own unique identity moving forward.

One key to traversing this time of change is to grow in our ability to be flexible and to work with our own inner reactions and responses. We can learn to transmute moments of suffering into opportunities for growth. A shift in internal perspective helps create spaciousness to respond to each moment as truly needed, rather than reacting from habitual behavior patterns that might not be the most compassionate intervention. By being able to relate with our loved ones in the present moment, without tinges of past regret or future expectations, we create room for healing and growth within the relationship and for ourselves.

Changing Roles with Other Family Members

Changes with the care recipient inevitably initiate shifts in the historical roles held by each family member, and can be disruptive and confusing to a family system. There are many areas of consideration between siblings, aunts and uncles, and extended family members that might need attention. Financial contributions, coordination of proper care at home or in a facility, managing medical appointments, the amount of time spent with the care recipient, and so on. It can be quite challenging at times to resolve these issues, and there is opportunity both for deepening family ties and for more conflict, resentment, and anger! Sometimes it is the moving-through conflict part that helps us get to the resolution and healing between family members. There is an opportunity to grow in our skills, advocating on our own behalf within the family system. There are opportunities for recognizing and developing our personal boundaries, for becoming more aware of our limitations, and for learning how to ask for help when things become overwhelming. It can be scary at times to challenge long-held familial roles, but it also can invite all members of the family to show up in a different capacity than they have in the past. One example may be an individual in the family who has long been thought of as unreliable, who begins to spend increasing amounts of time with the care recipient as their needs change, thus challenging that antiquated belief in the system. This could offer a new opportunity to be more connected with the whole family.

Increase in Authenticity and Self-Awareness

At the core of our beings we want connectedness and authenticity with the ones we love. What does it mean to authentically connect with our loved ones, and how can this help create a positive relationship with our care recipients? Authentic people in our lives are those who are easy to be around and with whom we feel safe. These individuals are perceived as honest, trustworthy, genuine, passionate, kind, helpful, and truthful about their shortcomings. They feel emotionally available, show vulnerability as they work through the challenging aspects of their lives, and recognize how they impact others. By being authentic in each moment, a caregiver has the ability to express frustration and confusion as challenges arise, while still sharing their love and desire to provide support.

Family caregiving is a powerful venue for developing self-awareness. For example, moments of aggressive behavior provide a mirror to see how we normally react to anger. Do you notice yourself being triggered and acting in an angry, sad, or frightened manner toward your care recipient? Or are you able to hold a larger perspective that, for instance, your loved one is overstimulated by the loud noises coming from the action-packed movie on the television, but lacks the awareness to express the root of their discomfort? Imagine the shift in your relationship with the care recipient if you are able to express your needs and experiences of the present moment, rather than just reacting harshly, and how that ability to see and be seen might allow you both to show up as your most whole selves. As you begin to practice this level of self-awareness, it's easy to notice the transitory nature of emotions and sensations. This practice can lead to a deepening of awareness toward the preciousness of life and a path to taking the challenging moments with a grain of salt.

Being a family caregiver can be a time of great transition, emotional growth, and personal healing if you carry the intention to let it be so and bring effort to the process. It is a ripe opportunity to use challenges as food for transformation. Just as the lotus flower blooms through muddy water, so can opportunities be born out of murky situations. The three topics discussed above are by no means the only areas where growth can occur, but I hope they can be guideposts on the journey. As our society continues to age, the opportunity to use relationships with our elders increases. By utilizing resources available in our community and by taking good care of ourselves along the way, caregiving can be a potent and powerful experience for ourselves, our siblings and friends, and for the care recipient.

Avery McKenzie, MA, SPT, LPCC, is a team leader with Windhorse Family and ElderCare.

Positive Aftereffects of Caregiving by Susan Damon

uring their caregiving experience, caregiv-D ers may wonder, "How did I get here, and what will I do when this ends?" Each caregiving experience does end-the care recipient may improve to the point caregiving is no longer required, conditions may change that necessitate more professional care, or a care recipient's life journey may end-and caregivers move on to the next phase of their lives. As a caregiver, you've been doing a job, a job that has most likely given you a new skill set, experience, and insight. How will this experience shape you as you now move forward? What new opportunities can a caregiver find after their caregiving experience?

Chris Griffin-Wehr was the primary caregiver for her mother, who spent the last 3½ years of her life in a Boulder County memory care facility. Chris says she knew going into the experience "that there are things in life you can't fix." She learned "that just being in the situation can be more important than doing something. It was hardest when there wasn't anything I could do but just be there with my mom. Those times also became the most rewarding."

There are two main things Chris learned during her caregiving experience. First, when she began her caregiving journey, Chris says she often felt alone, but she "now knows there are many people out there going through it, and there is a tremendous need for support and sharing among caregivers." Because the act of caregiving may not always be highly valued in our society, the second thing Chris learned, from her reading of Barbara Brown Taylor's books, An Altar in the World and Learning to Walk in the Dark, is that "if the world doesn't give much recognition to what you do, you need to give meaning to what you do. You get to say what is meaningful." Chris says caring for her mother as she lost her memory "changed how I value my time." Before caregiving, Chris had the traditional values of a career-oriented professional, but now she says she "can find her own value in life" without looking at those more traditional values.

Chris kept a journal during the time that she was a caregiver, and after her mom's death she started going through her entries, putting them in book form as something she needed to do for herself. As she shared her efforts with those close to her, people began to encourage her to publish her book. A friend knew a publisher who agreed to look at her book and then asked Chris to turn it into a workbook for caregivers.

Travels in Place, A Journey into Memory Loss is essentially a memoir, says Chris, with a blank page and a question at the end of each chapter for readers to explore their own thoughts. Once the book was published, Chris began promoting it locally, at locations such as churches and symposiums. As she became "a little more brave," she applied for grants at Ghost Ranch where she has now done small workshops "with the focus on discovering the meaning of what you are doing. What is the meaning, the value of what you are doing in caregiving?"

After the death of her husband, Lynn Malkinson found that for several years she had an immediate bond when she met someone who had also lost a spouse, and the two "could communicate about the similarities and differences" in their experiences. Lynn was a social worker for many years and now felt that when talking to recent widows, she had "some legitimacy" she hadn't had before her caregiving experience with her husband, Al.

Lynn had worked in hospices for many years and says, "I loved my work at hospice—I spent much time with caregivers and learned a lot from them." After her own caregiving experience, Lynn volunteered for training to become a class leader for Powerful Tools for Caregivers, a sixweek program to provide family caregivers with tools to increase their self-care and confidence. "I feel I have things to say from my caregiving experience, and leading the class seemed a natural way to do that."

Kaelin Kelly found that caring for her mother at the end of her life led to changes in her own life afterward. Kaelin's mother lived independently in California until she became so frail "she needed help with everything," and Kaelin and her husband decided that Mom should come live with them in Colorado. Kaelin admits she hesitated at the thought of having her mother move in with her as their personalities were very different. But their relationship changed, and Kaelin now says, "It was a major gift to realize that my relationship with my mother could totally soften and connect, and that nothing is permanent and cut in stone. I now approach everything with a question—what can it be rather than seeing it through the eyes of the past." Kaelin's mother "was very sharp" mentally even as her physical health declined, and she died at age 93, six months after moving in with her daughter.

Kaelin began writing poetry when her mother moved into her home, saying "poetry helped me stay focused, rather than just journaling" about the experience. "I would sit outside my mom's room in the early morning and found that poetry was much more useful in finding and resolving the issues I was facing." Kaelin wrote her last poem on the day her mother died. As she later looked at her poems, she also was encouraged to share them and she self-published her collection, *A Caregiver's Journey*. Many of these poems have appeared in *Care Connections* over the years.

6

As Kaelin began her caregiving experience, she says, "It was clear to me that I had to avoid resentment. I was able to do that by being constantly aware of what was in it for me. I was constantly writing—what is my growth, my new awareness, what is working for me?" Her mother died 13 years ago, and Kaelin says, "Still, my main self-awareness after 13 years is how proud I am of what I did and how I stepped up to the plate when I was needed." She explained that with hospice assistance, her mother was able to die peacefully at home, and "it was such a good feeling that she didn't have to go to the hospital. I was so opened by the beauty of her death and knowing that I had done caregiving well."

After her mother's death, Kaelin says she "couldn't wait to be a hospice volunteer," and she volunteered at a hospice care center for several years. She explains now she "keeps coming back to death and dying and is well aware that there are good and bad deaths. I believe we need to go back in time to where we have more comfort with death and preparing for death." She works with The Conversation Project, where her goal "is to get people to talk about what is inevitable. People can have a lot of control over the dying process, but only if they plan it." Another way she tries to promote "good" deaths as much as possible is by participating in the Moon Over Mountains Threshold Choir. "We sing acapella at the bedsides of people who are passing. It's a precious experience and such an honor to be invited to support the dying process with gentle song."

Kaelin says one thing she learned as a caregiver is that people often say, "Let me know what to do," and she found that frustrating because she didn't know what they really meant. Now, she has learned to just show up when a friend is caregiving. "I call and say that I am going shopping, so give me a list of what you need, or I tell them that I am coming over for two hours and I will do whatever they need me to do."

Each of these caregivers found unique meaning in caregiving that has continued to enhance their lives—and the lives of others.

Susan Damon is a volunteer long-term care ombudsman, a volunteer Powerful Tools for Caregivers class leader, and a member of the Care Connections Editorial Advisory Committee.

Modeling Caregiving for Children by Mary Kathleen Rose

W hen I was a growing up in the 1950s and 1960s, I never visited a family member in the hospital. In those days visiting hours were very limited, and children usually weren't allowed. Two of my cousins died, and while my parents traveled to the funerals, we children did not. I didn't know what happened, and we never talked about it. Yes, my parents were probably protecting me and my siblings from the harsh realities of illness and death, but it seemed like such a big, unknowable mystery to me. And I felt excluded.

Many years later now, attitudes have changed. The hospice movement and healthcare trends in general have created many options and have favored more open communication between healthcare providers and family members. Yet, many caregivers still wonder what the role of children should be when someone in the family is ill for an extended period of time. Caregiving is a natural part of family life whether it is nurturing growing children or caring for others when they are sick, whether that illness is acute, chronic, or terminal. Children often will want to participate in the caregiving. Let them have the opportunity. Give them something to do. For example, they can help to prepare or serve food and drink. They can help with cleaning the room or running errands for other family members. Thank them and let them know they are making a difference.

Including children in caregiving lets them know that they matter, and that aging and illness are a part of life. They have the opportunity to see normal changes, so that when serious illness and/or death occurs with others later in their life, they are actually better prepared to deal with it.

Children are naturally curious, and that curiosity is a good thing. Don't be afraid to answer their questions. Keep answers simple and age appropriate. Avoid over-explaining. Let children be themselves around the family members who are ill. Often they want to touch the person who is ill. They can ask their loved one if that is okay. Their energy can really brighten the day for someone who is restricted to bed.

Everything you do, and how you act and respond to the ones in your care, becomes an example for children. Whether you are aware of it or not, you are modeling how to be with them. For example, when you are in the same room as the one who is ill, be direct when you talk to him or her. In other words, talk to the person, not *about* them.

Let children know it is okay to talk to "grandma;" for example, even if she doesn't seem to be aware or to respond verbally to your words or questions. Explain to the child this way: "Grandma does hear you. She just isn't able to talk right now." Maybe the child can read to their loved one, or sing to them, or simply sit and listen to music or television with them. I remember one child who was content to be in the hospital room, coloring and drawing pictures, as other members of the family visited and tended to the needs of a sick grandparent.

Aging, illness, and death are still a mystery, but by acknowledging the realities of the cycles of life, we can dispel some of the fear, grief, and uncertainty that accompany the process of growing up. Children want to be included. They want to be part of something bigger than themselves. As we openly acknowledge them as part of the family who cares for one another, we just may be planting seeds that allow them to mature into compassionate members of their community.

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

Caring for Dad by Dhiana Armstrong

M y dad is 98, and lives with us. I'm so happy that we have room for him, that I know where he is, that he can still go out and water the garden, cuddle with the cat, and play with our little dog.

I'm grateful that I work for myself and can adjust my schedule to have lunch with him on most days. And I'm grateful I have such a wonderful and supportive husband who also cares for him.

Dad came to live with us over four years ago from another state. It was wonderful to see his relationship with my son, his only grandchild, expand and grow when they were finally living in close proximity to one another.

However, my dad was angry for the first year. He didn't want to leave the house he had lived in for 48 years. He had made no effort to wind down his storing of canned goods, paper products, tools, and anything "useful," as if waiting for the next



world war. This isn't uncommon for someone who almost starved to death in WWII.

Dad had failed to see or admit what he could no longer do, which was keep up his house. The plumbing, electrical system, roofing, and appliances were all failing, but he could no longer grasp how to repair them or get proper help.

He was no longer responding appropriately to safety issues, as I found out when he left the gas stove on one day. He was still driving, without benefit of peripheral vision. He was virtually deaf, not having the eyesight or manual dexterity to deal with better quality hearing aids.

So the first year with us was hard. I knew beyond a doubt that I had done the right thing. It took lots of effort on our part to move him to Colorado and to make many trips to his old house to clean it out and get it ready to sell. But he was angry and not the least bit grateful. That hurt.

He eventually adapted, realized how difficult my task was, and began to understand. I took the free National Caregiver Training Program classes which were very helpful. Having a supportive spouse and many incredible supportive friends was immensely helpful. If I didn't have a spouse or my friends, I definitely would have joined a support group.

Boulder County seems like a model community for senior care. We have made use of Senior Peer Counseling, Senior Special Friends, Via, volunteer drivers, Meals on Wheels, and other resources at senior centers like massage and equipment rentals. My father also enjoys his senior day program one to two days a week. Peer relationships are important at every age.

There have been new doctors, physical therapists, dentists, and lawyers. The occupational therapist told us where to install handrails in the bath and shower and about the volunteers who do the installation.

It's been a lot to coordinate—a part-time job, really. I haven't been able to work as much be-

cause of it. But I've learned a lot and now have a whole new body of resources to share. And we've had this time with my dad.

I know caregiving a parent is not for everyone. The circumstances have to work, and the relationships have to work. But for me it feels like a wonderful "360" in my life. My dad was in a grand phase of life review the first couple of years he came to live with us. I thought I had heard all of the war stories, but I hadn't. There were more! And I'm glad I got to hear them—some I am sure he had never shared with anyone before.

We reminisced about my childhood and his. About the things we used to do then, and how life was different. Dad taught us how to swim and fish, shoot a gun, ice skate, and dance the polka and the waltz. He bought my first pair of skis. He paid for my first college degree, including a semester abroad. He shared his love of gardening, which we continue to do together today.

Now I get to give back, and it feels good.

Caregiver Dhiana Armstrong is a Boulder County resident.

Calmer Waters: The Caregiver's Journey Through Alzheimer's and Dementia by Barbra Cohn

I spent a decade caring for my husband Morris who died from younger-onset Alzheimer's disease in August 2010. Afterward, I was compelled to write *Calmer Waters: The Caregiver's Journey Through Alzheimer's and Dementia* to help other caregivers feel happier, have more energy and time for themselves, sleep better, feel more relaxed and confident, and experience inner peace ... because I had become an expert caregiver. I felt that if I didn't reach out to help others my experience would have been for naught.

(continued on page 9)



Our Advertisers

Thanks to the agencies and businesses that help support Care Connections with their advertisements. For information on joining them, please call 303-678-6116 or email InfoCaregiver@bouldercounty.org.



HomeCare of the Rockies Bringing the Best Care to Your Home

HomeCare of the Rockies provides quality, non-medical, in-home care, and something more -peace of mind for you and your family.

- Licensed, bonded, insured
- Flexible schedules
- Trained caregivers, matched to your family's needs and preferences

720-204-6083

HomeCare of the Rockies.com

- Post-hospitalization care
- · Alzheimer's & dementia care specialists

of the Rockies

we are here to help.

24/7 HELPLINE

1.800.272.3900

assistance in 140 languages



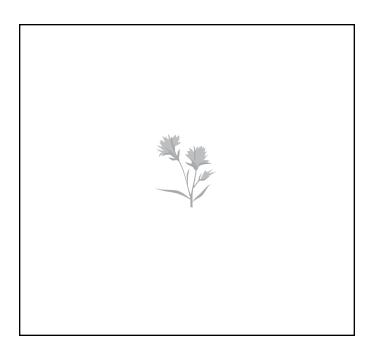




- * Medicaid Planning
- * Elder Law
- * Guardianships
- * Probate Litigation * Disabled Child Plans
- * Conservatorships

Denver Metro (303) 770-0673 Boulder County (303) 604-6030

Visit our website at: www.Elderlawcolorado.com







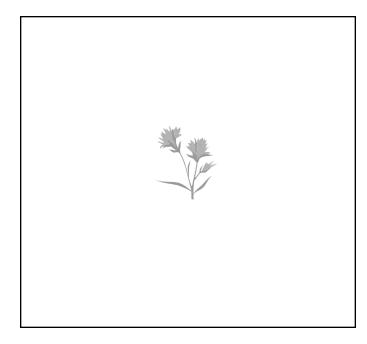
The Kapsak Law Firm, LLC You need a plan. We can help. Contact our office for assistance with: • Estate Planning • Wills and Trusts • Powers of Attorney • Medicaid Planning • Estate and Trust Administration • Guardianships and Conservatorships • Disability Planning Tel.: 303-651-9330 Www.Kapsaklaw.com

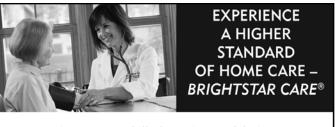
info@kapsaklaw.com











Companion Care to Skilled Nursing · Alzheimer's Care Licensed, Bonded, Insured · No Minimum Hours Transportation · Respite Care · Injections/Infusions Hourly, 24 Hour, Live-In Services Medication Set Up and Management

24 Hours a Day · 7 Days a Week · Always a Live Voice



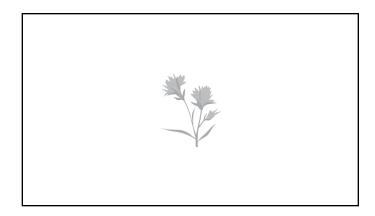


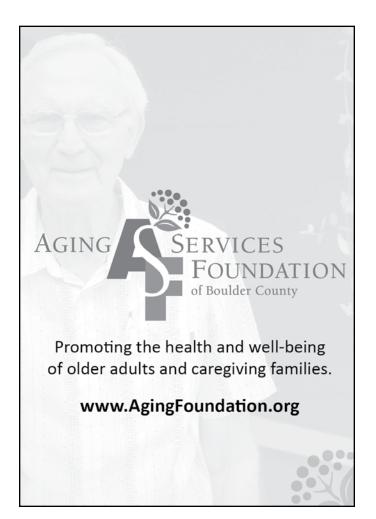


When you need expert care at home













CREATING MOMENTS OF JOY FOR YOUR FAMILY



- Alzheimer's CARES
 Certified Staff
- Private room and bath for every resident
- Safe, secure, central park to encourage exercise & socialization
- Innovative use of music
- Owned and operated by a family of professional care givers
- Certified Eden Associate/ RN on staff

720.537.9355

1744 S Public Road, Lafayette, CO 80026 www.LandmarkMemoryCare.com contact@landmarkmemorycare.com



Ellen Knapp MA, LPC, CSA Geriatric Care Manager • 18 Years Experience

Caregiver support and coaching
Medical care management and advocacy
Assistance with daily activities

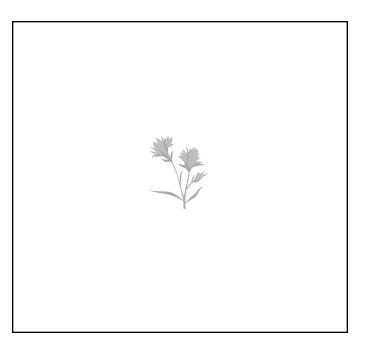
Call for a free phone consultation.

720-217-9614 • ellenknapp.com • ellen@ellenknapp.com





Improving the quality of Life! We offer Non-medical Personal and Home Care to help improve the quality of your life at home. We accept Medicaid, LTC Insurance, Private Pay & Respite Grants. 717 5th Ave. Longmont, CO 80501 303.357.5631





CAREConnections

Calmer Waters: The Caregiver's Journey Through Alzheimer's and Dementia (continued from page 8)

I was in a unique position to write *Calmer Waters* because I've been a professional writer for the past 36 years, and writing is the easiest way for me to express myself. Since I write for manufacturers of nutritional supplements, I am continuously researching the latest and greatest "silver bullets" to improve health, prevent disease and illness, and support cognitive function.

Writing *Calmer Waters* was based on both my personal experience as a caregiver and my pro-fessional experience as a writer/researcher.

How is Calmer Waters different?

Calmer Waters is different from other books for the Alzheimer's and dementia community. It includes my life story, inspirational essays and rituals from spiritual leaders, stories from family caregivers, and twenty healing modalities from renowned experts that can be practically incorporated into a daily regimen. An added bonus is that both care partners —the caregiver and memory-impaired individual—can use most of the healing modalities, allowing for a stronger connection between the two.

Response to my book

The feedback I've received has been very positive. Readers have reported that the book is an excellent resource for all caregivers, regardless of the health issue they are dealing with. Noncaregivers also are enjoying *Calmer Waters* and are using it to improve their general health.

Support for caregivers

Personal accounts of the journeys that nine caregivers embarked on with their loved ones illustrate the challenging medical, financial, emotional, and social roadblocks that accompany coping with Alzheimer's and dementia. A rare blend of storytelling and practical and spiritual advice, *Calmer Waters: The Caregiver's Journey Through Alzheimer's and Dementia* offers an uplifting account of the strength of the human spirit and a testament to the love and dedication of the 15 million Americans caring for a memory-impaired relative or friend.

Barbra Cohn (www.cohnwritingsolutions.com), member of the Care Connections Editorial Advisory Committee, nutrition educator, and longtime professional writer, has authored hundreds of health and travel articles for national and local publications. She lives in Boulder, has two children, and is a devoted grandmother to four grandchildren.



One Last Chance to Heal by Reggie Gray, LCSW

oday was the last day of the Farmers' Market for the season, and, after tasting a sample of plum jam, I had to return to the stand to buy a jar even though I had bought a large jar of jam the week before. I told the farmer that I knew if I did not get it today, I wouldn't have another chance for a year and would regret not buying it. The taste was memorable!

Sometimes we have one last chance, and we have to force ourselves to take advantage of it. I have learned to anticipate regret and then do my best to act so that I do not feel it later. Caregiving for a loved one, especially near the end of their life, may be that one last chance to heal an old wound, to clear up family secrets, to forgive and be forgiven, to open our heart in a way we have longed to do forever.

There are reasons—and usually good ones why this "business" was not addressed earlier in life. It can be scary and make us very anxious to bring up the past. Otherwise, we would have

(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 January/ February 2017 issue is November 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, November 3 and December 1, 2 – 4 p.m., at East Boulder Senior Center, 5660 Sioux Drive, Boulder (call 303-441-1546 to register); on Tuesday, November 22 and Monday, December 19, 10 a.m. - 12 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont (call 303-651-8411 to register); on Friday, November 18, 1:30 - 3:30 p.m., at Lafayette Senior Center, 103 S. Iowa Avenue, Lafayette (call 303-665-9052 to register); and on Wednesday, December 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. For more information, visit www. bouldercountyMedicarehelp.org.

Medicare Open Enrollment Period, the time to review and make changes to Medicare Part D (prescription drug) or Medicare Advantage/ Health Plans, is October 15 – December 7. Call to schedule an appointment with a Boulder County Medicare Counselor for an individual review of your plan at clinics held at local senior centers, on Wednesdays, November 9 or 30, 9 a.m. - 12 p.m., at West Boulder Senior Center, 909 Arapahoe Avenue, Boulder (call 303-441-3148 to register); on Thursdays, November 3 or 17, or December 1, 9 a.m. - 12 p.m., at East Boulder Senior Center, 5660 Sioux Drive, Boulder (call 303-441-4150 to register); on Fridays, November 4 or December 2, 9 a.m. – 12 p.m., at Lafayette Senior Center, 103 W. Iowa Avenue, Lafayette (call 303-661-1492 to register); on Mondays, November 7, 14, 21, or 28, or December 5,9 a.m. – 12 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont (call 303-651-8411 to register); and on Wednesdays, November 2 and 30, 9 a.m. - 1p.m., at Louisville Senior Center, 900 W. Via Appia, Louisville (call 303-666-7400 to register). Pre-registration is required, and spaces are limited. Note: This annual open enrollment period is not for enrolling in Parts A and B or Medigap plans. For more information, call 303-441-1546.

Alzheimer's Association Colorado Chapter presents **Know the 10 Signs: Early Detection Matters**, <u>in Spanish</u>, on Thursday, November 10, 10–11:30 a.m., at Sister Carmen Community Center, 655 Aspen Ridge, Lafayette; and <u>in</u> <u>English</u>, on Tuesday, November 15, 10–11:30 a.m., at West Boulder Senior Center, 909 Arapahoe Avenue, Boulder, and on Monday, December 5, 2 – 3:30 p.m., at The Peaks at Old Laramie Trail, 660 Old Laramie Trail, Lafayette; **The Basics: Memory Loss, Dementia and Alzheimer's**, on Wednesday,

11

December 7, 10 a.m. - 12 p.m., at Landmark Memory Care Community, 1744 S. Public Road, Lafayette; Understanding and Responding to Dementia Related Behaviors, on Wednesday, November 30, 3 – 5 p.m., at Kaiser Permanente Baseline Clinic, 580 Mohawk Drive, Boulder; Healthy Living for Your Brain and Body: Tips from the Latest Research, on Wednesday, November 16, 2:30 - 3:30 p.m., at Erie Community Center, 450 Powers Street, Erie, and on Wednesday, November 16, 6 - 7:30 p.m., at The Academy, 970 Aurora Avenue, Boulder; and Living with Alzheimer's for Late Stage Caregivers (2 parts), on Tuesdays, November 8 and 15, 2 – 4 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. The classes are free, but pre-registration is required, at 800-272-3900. Class descriptions are available at www.alz.org/co (Classes and Workshops, Calendar, Boulder).

Longmont Senior Services offers Mental Health Resources for Seniors, about the wide range of community resources available to seniors and their family caregivers for supporting those struggling with mental health, with Sharon McCaffrey, from Soft Voices, Shalini Jennings, with Senior Reach at Mental Health Partners, Dr. Carol Spar, psychologist, and Elaine Keiser, Longmont Senior-to-Senior Peer Counseling program, on Tuesday, November 8, 4 – 5:30 p.m.; and Mental Health Emergencies, about how to respond and what happens next when someone has a mental health crisis, with Charlie Davis, with Emergency Psychiatric Service, Adena Kling, with Longmont United Hospital, and Dr. Karen Rice, from Mental Health Partners, on Tuesday, November 15, 3 – 4:30 p.m.; both at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. The presentations are free, but pre-registration is required, at 303-651-8411.

Boulder County Area Agency on Aging holds an Advance Directives Workshop, for LGBT (lesbian, gay, bisexual, transgender) older adults, with Phyllis Coletta, of The Conversation Project, Maggie Benton, financial planner, and Alice Ierley, attorney/fiduciary agent, on Saturday, November 19, 10 a.m. - 12 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont (no charge; pre-register by November 17, at InfoLGBTelders (a)bouldercounty.org or 303-441-3583); and the 16th Annual Lavender Gala, a holiday celebration for LGBT older adults, on Sunday, December 4, 1 - 4 p.m., at Nissi's Bistro in Lafayette (pre-register by November 30, at http://lavendergala16.eventbrite.com or 303-441-3583).

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

Moon Over Mountains Threshold Choir sings acapella at the bedsides of people who are dying. For more information about the choir, or to request that they sing for your loved one, contact Kaelin Kelly, at 720-504-9495 or *kkelly30@ msn.com*.

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





One Last Chance to Heal (continued from page 9)

already addressed the issues. The pain of growing up with an alcoholic parent, with mental illness in the family, or with abuse and violence in the home can leave very deep wounds. Having a parent who was emotionally unavailable whether because of the parent's emotional limitations, a consuming career, or any other reason (it doesn't really matter to the child)—has the same impact. It leaves a scar.

We all carry "stuff" from our childhood into our adult life, and coming to terms with those unresolved issues can bring a sense of peace and understanding that helps us grow. Resolution is not possible in all families, but I believe it is worth trying in most situations. Sometimes we can be surprised by the openness that comes at the end of life. At this time difficult personality traits can soften as the dying process unfolds. Hands-on care can itself communicate many healing and forgiving messages so that the issues may not need to be directly confronted. The relationship may heal simply through the role reversal of the child and the parent. As we care for our dying parents, a deep connection can come that melts away those old struggles.

If we cannot finish the unfinished in the relationship with the other person, then we are left to ourselves to come to terms with it. This is possible but not ideal. Sometimes it takes working with a therapist to heal our childhood wounds if we cannot do it in-person.

Healing may also take place between siblings after a lifetime of competition and jealousy. Working together caring for a parent can be the opportunity to build an adult-to-adult relationship that never formed when childhood wounds were still in the way. Of course we have all heard of families that argue about an estate settlement to the point that it ends up in court and siblings never talk again. The film *Straight Story* was about such a family. The old man drove his power lawnmower hundreds of miles to see his dying brother whom he had not spoken to in many years. At the end of life he could not let the last opportunity to heal the rift go by. They had both mellowed and could forgive in a way that was not possible earlier in their lives.

All of this said, how do we do this? It may be the hardest thing you have ever done. It is far from easy, but most worthwhile things in life are a challenge. It is useful to know ahead of time what you want to accomplish. Knowing what you want to say is safer than knowing what you need from the other. Resolution that depends on the other person saying or doing something leaves you very vulnerable. It is important to ask yourself, "What was my part in this?" It is frequently said that nothing is one-sided. There are always two sides to a story. However, this is not the case when a child has been abused or neglected. Maybe in that family one would want to tell the parent what it was like as a child or ask why it happened. Just asking "why?" can be healing and is not necessarily dependent on the specific answer. Remember that it is a setup to begin the process wanting a certain response such as an apology. The conversation needs to be open for all to listen and to speak without a preconceived expectation of the other. The only useful planning is for you, yourself.

Sometimes it is helpful to talk with a neutral person—a friend, faith leader, or counselor—to get an objective perspective on the situation, feedback on your plan, and an opinion on how realistic it is to expect a healing of old wounds. It also is useful to think about who should be present at such a meeting and why, what setting is best, how to keep your anxiety in check, and how to prevent getting defensive and caught up in old patterns of relating that have not worked in the past.

Taking the time to think through all of this maximizes the chance for a rewarding and meaningful

CAREConnections

outcome. It may be an outcome that you do not anticipate. Regardless, you will not regret letting an opportunity go by forever. Even if you are disappointed, you will then know for sure.

Reggie Gray, LCSW, has been a family therapist in Boulder since 1978, and works with families in all ages and stages. This article first appeared in the January/February 2007 issue of Care Connections.

"Opportunities to find

deeper powers within ourselves

come when life

seems most challenging."

- Joseph Campbell

In the Wee Hours of Christmas Eve by Kaelin Kelly

V ou look so frail At first glance Only your head showing Above the covers Big eyes open, staring at me Waiting for my first words "Good morning," I say A smile on my face. A pause, at first nothing Then a smile lights your face "Merry Christmas," you say "Merry Christmas," I respond Delighted you remember

"We're supposed to be happy" You say. Once again I hold the positive space "We are happy, Mom. We're together and will share a lovely Christmas day." Your big eyes look into mine Then slowly arms lift And fingers gently touch my cheeks You pull my face towards yours And gently kiss my cheek I smile "<u>That</u> makes me happy, Mom. So happy."

I don't remember the last time You spontaneously kissed me Maybe 50 years ago, who knows? Maybe never The sweetness of this moment Touches my spirit

I contrast this With the months of transition When it was unclear If you could live alone Or should Your worry Permeating your life The unknown looming, Always present

There's still unknown But not the day-to-day kind I've worked hard To teach you what you can count on

And today my reward A tender moment, spontaneous Makes it all worthwhile

From "A Caregiver's Journey: Poetry by Kaelin Kelly."

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	303-441-4388/303-413-7494 (bilingüe)	
City of Lafayette	303-661-1499	
City of Longmont	303-774-4372/303-651-8716 (bilingüe)	
City of Louisville	303-335-4919	
Erie	303-441-1617	
Lyons area	303-823-9016	
Nederland area	303-258-3068	Aging and Disability Resources for Colorado
Niwot area	303-441-1617	
Superior	303-441-1617	Resources for Colorado