

CAREConnections

Information and Inspiration for Caregivers

A Publication of Boulder County Area Agency on Aging

May/June 2018

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Caregiving Symposium

Dear Caregiver,

Sometimes a person needs a map to figure out how to deal with the territory they find themselves in. Caregiving can be like that. This is especially so if you are new to caregiving or things have recently changed. But even a seasoned caregiver can feel lost about how to make caregiving manageable.

Virginia Morris wrote an excellent book for caregivers called *How to Care for Aging Parents*. If you get a chance to read this, you'll find it's full of great information and pearls of wisdom. Beginning in this issue, and continuing in the next, our writers offer their own perspectives on Morris's ten survival tips: assess, organize, plan, take care of yourself, get help, communicate, show respect, dump guilt, prepare for the end, and be spontaneous. Some of the pieces are deeply personal and some are more practical. Take what you can from them, and may they serve as a piece of your own map through caregiving.

The Editors

Reduce the Stress of Caregiving

by *Barbra Cohn*

If you are a caregiver, you probably feel tired and stressed and sometimes just want to hide under the covers. But what you may not know is how damaging stress is and why it's vital that you take care of yourself.

The Chemistry of Stress

Once upon a time stress was episodic. If a tiger approached you, your body released stress hormones to help you fight or flee. By the time the encounter was over, the entire stress response had been fully utilized and the body returned to normal. The fight-or-flight response looks something like this:

- Pupils dilate to sharpen vision.
- Heart rate and blood pressure increase to accelerate the delivery of oxygen to fuel the muscles and critical organs.





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- Blood flow is diverted from non-critical areas such as the gastrointestinal tract to critical areas such as the heart, skeletal muscles, and liver.
- Liver releases glucose and fatty acids into the bloodstream. Glucose is for immediate energy; fat is needed when the fight-or-flight response lasts longer than expected.
- Bronchial tubes dilate to maximize the exchange of oxygen and carbon dioxide.

Today, however, if you are a caregiver and are continuously dealing with the stress of worry, poor sleep, and trying to take care of yourself, as well as the person you care for, the body gets used to a constant state of “emergency alert.” The results can be devastating. Blood pressure rises. Depending on how many stressful situations you encounter it may stay elevated, damaging the sensitive tubules of your kidneys. Ultimately, kidney function is compromised, which raises your blood pressure even more, which contributes to further kidney damage, which raises blood pressure. Glucose that is dumped into your bloodstream goes unused, so your body has to produce an enormous amount of insulin to handle it. Eventually, this may result in hypoglycemia or diabetes. Fat that is dumped into your blood also goes unused, so it clogs your arteries, leading to cardiovascular disease. If you drink caffeine, the stress hormone cortisol becomes elevated, which can set you up for countless health problems including poor quality of sleep, impaired immunity, and age-related deterioration. The adrenal glands produce or contribute to the production of about 150 hormones, all vital to your health. When they are stressed, they become exhausted. Once the adrenal buffer is gone, you become a prime candidate for asthma, allergy, fibromyalgia, chronic fatigue syndrome, and other autoimmune disorders.

Devise a Plan that Works for You

So how do you cheerfully go about your duties as a caregiver without letting stress affect your health? First of all, you need a plan to help you deal with tough issues, so you can think more clearly and act from a calm, centered position. That plan should include a good diet and excellent nutritional support with nutrients that enhance relaxation. Establish a daily routine that includes plenty of quality sleep, exercise, and a stress-reducing or relaxation technique. Just keep in mind that even though it's impossible not to have some

stress in your life, you can strengthen and nourish yourself on a daily basis so that you're better prepared to deal with the next crisis that arises.

Ways to Reduce Stress and Support Your Overall Well-being

Before you get out of bed in the morning, breathe deeply and for a minute or two repeat an affirmation such as, "Today will be a good day," "I am a loving, patient person," "I'm feeling strong and healthy today," "I am grateful for my family and friends," or "I am a kind, compassionate caregiver."

Eat a good breakfast. Your blood sugar is low when you awake after fasting for 6-8 hours. Support healthy blood glucose levels by eating protein, a complex carbohydrate, and colorful fruits or veggies for vitamins and antioxidants. A bowl of cereal with low- or no-fat milk doesn't cut it. As a caregiver you need energy to get you through the morning. My favorite energy-boosting, neurotransmitter supporting breakfast is eggs (anyway you like them), sautéed kale or spinach with onions, a side of beans, and melon or strawberries to finish it off. Yes, it sounds like a lot, and it is. But the portions can be small and you can use your leftover veggies from dinner the night before. Or if you want a lighter breakfast during summer, have a protein smoothie with yogurt, protein powder, and fruit. Just make sure that whatever you eat includes high-quality protein.

Go for a walk. If your care partner is ambulatory, take him or her with you. Research published in the March 2017 issue of *Cell Metabolism* found that a brisk walk could help slow the aging process. CU researcher Monika Fleshner, PhD, has said that "based on the research that my colleagues and I have done in the past thirteen years, we know that regular physical activity promotes stress robustness (resistance to

stress) and changes the way the brain and body respond to stressors . . . If you are highly conditioned from a regular exercise routine, then you can respond better psychologically and physically." (pg. 174, *Calmer Waters: The Caregiver's Journey Through Alzheimer's & Dementia*)

Sing in the shower, sing with your care partner, or sing in a spiritual setting. "Music engagement can help you connect with your loved ones and care partner. Oxytocin, the chemical in our brain that is released during intimate interactions such as breastfeeding and intercourse, helps us to form trust and bonds with other humans. It is fascinating that this chemical is also emitted when people sing and make music together," says neurologic music therapist Rebekah Stewart, MA.

Stay present. Learning how to stay present enhances how you relate to the person you are caring for, allowing you to create community with that person. The simple act of breathing with someone—of matching your breath to his or hers—enables you to create a spiritual connection with that person.

Create a soothing space. Light a candle, enjoy a vase of fresh flowers, light incense, listen to uplifting music.

Use aromatherapy oils to uplift the spirit and calm you down. Explore the variety of essential oils which can be used in a diffuser or spritzed on a pillow case, shirt collar, handkerchief, or tissue that you can tuck in your shirt pocket.

Dance as though no one is watching. Dance alone in your living room to your favorite music, or with your care partner. It is an easy way to get the blood flowing, loosen up stiff muscles, and a fast and easy way to uplift your mood.



Get a pet (if you don't have one). "Animal Assisted Therapy is recognized by the National Institute of Mental Health as a type of psychotherapy for treating depression and other mood disorders. Spending time with an animal seems to promote a sense of emotional connectedness and well-being," says Diana McQuarrie, Founder and Executive Director Emeritus of Denver Pet Partners.

Laugh. Charlie Chaplin once said that, "A day without humor is a day wasted." No matter how hard things seem, even if you are a caregiver to someone who has been ill for many years, try to find the humor in everyday things. You will soon be laughing and the endorphins will flow and uplift your mood.

Barbra Cohn cared for her husband who had younger-onset Alzheimer's for 10 years. Afterwards, in order to help caregivers feel happier, healthier, and less stressed, she wrote Calmer Waters: The Caregiver's Journey Through Alzheimer's and Dementia. Read her blog at barbracohn.com.

Plan Before a Crisis Happens



by Kelli Squire

How do you plan for long-term caregiving when you can't predict what the future will bring? Most of us consider caregiving an honor and do so willingly because of the love and respect we feel for our loved one. We feel blessed and fortunate to have the time with them for as long as they are with us. But, let's be honest. Caregiving can be stressful emotionally, physically, and financially. We've all heard the statistics of how many caregivers experience medical issues of their own due to not taking care of themselves.

When it comes to surviving and even thriving as a caregiver, what can you do in the present to plan for the future? We need to start by looking objectively at the big picture. As we grow older, health issues happen. We all like to think that we will be healthy through old age, but that's not usually the case. Try to anticipate what could happen in the future so you can make decisions proactively instead of reactively. Most people know to plan for retirement or to create a will, but many don't plan for emergencies. Instead, people are forced to react in situations where it may be hard to think objectively. Take the time to make a plan so you have peace of mind for the future.

Most hospitals have social workers on staff to help you navigate the complexities of these processes; however, you'll be faced with many questions and navigating the resources can be difficult. A few questions to consider: Who will care for my loved one when they leave the hospital? Will we try to do it ourselves? How do I get the time off from work and care for my own family while also caring for my loved one? Should we hire someone to help with the care? How do we find a reputable caregiver who will treat our loved one with kindness and compassion while providing them with the assistance they need? What will care cost? How do we access our loved one's savings to pay for the care? What do we do if they run out of money? Will our loved one be able to live safely in their current home?

By being proactive and having a plan in place, you'll alleviate some of the anxiety that accompanies a healthcare emergency. Pre-crisis planning empowers seniors to take control and make their own choices before a serious health emergency happens. This planning should include things such as ensuring your loved one has adequate

retirement savings to cover the cost of their care, creating a will, and preparing advance directives so you and healthcare providers understand your wishes. However, pre-crisis planning is also about proactively educating yourself about the options for care and services in your community. Pre-crisis planning includes:

- Having a conversation with your family about what the future will look like.
- Exploring assisted living and rehabilitation centers in your area and understanding the differences in care, services provided, and cost.
- Deciding about making safety modifications to your loved one's home, such as remodeling a bathroom to include a walk-in shower and/or installing handrails for the stairs.
- Researching home healthcare agencies to find providers with outstanding reputations and learning about their cost structure.
- Considering establishing relationships with professionals who are trained to assess, plan, coordinate, monitor, and provide other senior care services.

There are also some personal considerations for you and your family to think about before a crisis happens:

- How will you manage your time?
- How will you maintain the most positive mindset possible?

Time is our most precious commodity when caring for someone and, as a caregiver, how can you accept and embrace everything that is going on? How can you stay focused on the here and now and stay present in the moment? Your willingness to adjust your expectations can help prepare you when plans change. There's no harder job than being the person who is responsible for

caring for someone else's well-being. Take the time in the present to think about what you will do in the future if you and your family are faced with a healthcare emergency. Being in a crisis is never easy, but having a plan goes a long way to making the process easier. Winston Churchill said, "Plans are of little importance, but planning is essential." Nothing is closer to the truth when it comes to planning for long-term caregiving!

Kelli Squire, a certified care manager and dementia support specialist, is owner of About Time Senior Solutions.

Organize for Peace of Mind

by Sara Thompson

Especially when you're first beginning the process of caregiving, things can be incredibly overwhelming. Doctors' visits, insurance claims, estate planning, hospitalizations—all of these require planning and information. Getting organized early on will save you so much time, effort, and frustration. Here are some simple ideas that can make a big difference.

Generally, a doctor or other medical provider (and sometimes other places, like a potential residence) will need basically the same information, such as current medication list, all diagnoses, history of surgeries or hospitalizations, other current medical providers, insurance information, emergency contact information, and family medical history. Try creating a document with all of this information, perhaps in Microsoft Word or Excel, or even handwritten if you have legible printing. Make copies and keep them with you. When you get to an appointment, you'll have all of the info you need to fill out intake forms. Some providers may accept your document if it is well-organized



and clearly typed or written, rather than requiring you to fill out their whole form again.

Having a paper day planner can help with your schedule and to-do list, but you can also keep lists in there like what to pack for a hospital stay, providers' phone numbers, and more.

Friends and family may offer help, but without specific tasks that you need help with, they may not be able to assist in a productive way. Make a list of things that you really do need help with and that people could do with minimal instruction: running a load of laundry, going grocery shopping, picking up prescriptions, or mowing the lawn, for example. If you have that list handy, when someone asks if they can help, you can immediately give them a task that they can do. I promise, people will appreciate knowing a specific way they can help you.

Along with that, make a list of the friends and family who are able to help, what their schedules are like, and what they would feel comfortable doing (some people might be great with errands, others might be good with respite care to give you a break, and so on). If someone offers help, ask them right away what their schedule is like. If you have all this in one place, when you have an immediate need, you can look to see who might be available. Having this info at your fingertips makes getting some help a no-brainer.

Having your home organized can help so much with everyone's well-being. I recommend Marie Kondo's book, *The Life-Changing Magic of Tidying Up*. When you have a little time (and energy, of course) you can work on decluttering your home. If the task is overwhelming, there are many local services to help with home organization and decluttering.

Sara Thompson has worked with older adults and their family caregivers since 2002, managing a home care agency, volunteering, and facilitating a caregiver support group. She is a member of the Care Connections Editorial Advisory Committee.



Assess

by Kari Middleton

So you're a caregiver. What do you do now? Besides, of course, everything: medications, transportation, grocery shopping, home maintenance, social engagement...the list goes on and on. Wherever you are on your caregiving journey, and especially if the situation seems overwhelming, it can be helpful to take stock of where you are now to help you figure out where to go next. It's like planning a road trip: to figure out how to reach your destination, you need to know something about where you're starting from and the road conditions along the way.

It may be helpful to consider what your destination is, or put another way, identify your goal. For example, as a caregiver your goal may be to keep your loved one at home as long as possible, or to live as independently and happily as long as possible. If you're thinking about specific challenges you or your loved one currently face, what is your goal relative to each of those challenges? For example, suppose your loved one refuses help from a particular family member. If your goal is to make sure your loved one gets to their doctors' appointments, maybe it's not important that that particular relative provides the transportation; it could be worth looking into other options. In general, focusing on your goals may help you identify your needs or your loved one's needs as well as prioritize one issue over another, or one task over another.

Take a good look at what your situation is now, including the strengths and resources already at your disposal. Some of your resources might be formal: paid in-home help, for example, medical professionals, and support groups. Some might be informal, such as friends, family, and neighbors. We also each bring our own individual strengths, such as patience, the ability to be a great listener, or a sense of humor. Identify the things you or your loved one are doing that are working now, including what your loved one can do by themselves or with limited assistance. All of these could be things on which you can build later as needs arise or change.

Think about how your loved one is doing. What is the state of their health, both mental and physical? Are there things they need, or things that could be better for them? And don't forget about yourself! How are you doing? One of your goals should be to maintain your own health even while caregiving, so ask whether you have the help you need, emotionally and practically. What stresses you, and what works for you to ease your stress? Where might you go for help?

Consider also whether there are things you need to learn more about. For example, do you know enough about your loved one's health challenges to know what to expect as time goes on? Do you know how to provide adequate care, or are there skills you need to learn, such as lifting and transferring? Do you have a good sense of financial and legal issues related to caregiving? For example, do you know what your loved one's financial resources are, their current and likely future expenses, and who (if anyone) is legally authorized to make financial and/or medical decisions for your loved one if they become incapacitated? And if you need to know more,

where can you get the information? It's also worth considering, especially if you are a new caregiver, that you may not know what you don't know; it may be helpful to reach out to a trusted source just for general information.

Keep in mind that though you may have a good sense of your caregiving situation now, sometimes you will need to reassess. Circumstances change, and your goals might change along with them. Sometimes caregiving, like a road trip, can bring pleasant surprises. Assessing can help you make the most of them.

Kari Middleton is Respite Services Coordinator for Boulder County Area Agency on Aging and a member of the Care Connections Editorial Advisory Committee.

Preparing for the End

by Jessica O'Leary



Why is it that so few of us plan for something that all of us are going to experience?

We cherish life; we want to live as well as we can for as long as we can, but for many people that means refusing to think about what the end of life may look like, what we would like it to look like, or, most importantly, what we want to avoid.

We have the pleasure and the displeasure of living at a time when we have the medical technology to provide tests, procedures, and life-sustaining measures, as well as professionals who take an oath to cure, prevent, and treat. We lack the equivalence of that support for people who are at the end of their life. How will you respond when everyone around your loved one is focused on maintaining life and that focus is causing misery? Or when your loved one is choosing treatment that you see is causing them to suffer? The



decisions required near end of life can make you feel like you are backed into a corner with no good outcomes.

The most important question to ask now is what are your loved one's values, and what kinds of care would your loved one want or not want? What would you want or not want for them? Keeping their goals in mind should always be your priority, and this is often a lot easier said than done. What preparation can you make in advance to guide you when, not if, you are in this situation?

When individuals receive futile care or too much care, families don't forget. They may grieve for years the decisions they made or didn't make from lack of knowing or truly understanding the choices their loved ones would have made. They may only remember seeing the misery and be haunted by the conversations that never took place until it was too late. Sometimes it splits families apart forever.

So how do you prepare for the end, recognizing that it is inevitable? Classes on advance care planning and resources (i.e., The Conversation Project) are available in many communities, often at no charge. These classes foster conversations on end of life and start you thinking about scenarios that you need to consider. Ask the tough questions; the answers are vital to helping make informed decisions.

- What is quality of life to you?
- What would you or loved ones be willing to tolerate and at what cost?
- What do you need to know about life sustaining options: the advantages, disadvantages, consequences, the benefits versus the burden of each test or treatment?
- Will a test outcome guide you and your loved one in whether to move forward with a treatment, or do you already know that it's

something they would not even consider? If so, why put yourselves through more than you need to?

- What is the medical team afraid to tell you or what doesn't it know how to tell you?
- What information do you need to know or want to know?
- Does the treatment/procedure being offered take into consideration the other factors in your loved one's life?
- Are other co-morbidities part of the medical picture?
- Are your loved one's emotional and spiritual health being viewed as factors that are as important as medical decisions?

There is much confusion between palliative care and hospice care. Palliative care is a support model that focuses on comfort, quality of life, understanding goals of care, assistance with navigating the options, and compassionate support for the patient and family. While hospice has the same basic goals, palliative care is available to people who are still pursuing active curative treatments.

When a person signs on to hospice, they are acknowledging that there is no hope of cure but certainly hope for a high quality of life and help doing the things that are most important to them. Hospice is a philosophy of care that provides physical, emotional, and spiritual support for patients and their families wherever they call home: their own house, an assisted living, or a skilled nursing facility. If a person at home has acute needs that require a higher level of care than is possible at home, they can receive brief periods of 24-hour care in hospice in-patient units or in skilled nursing facilities, and then return to their own home.

(continued on page 9)



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Preparing for the End (continued from page 8)

At least one study shows that when patients elect hospice early enough that their symptoms can be managed, they can live up to 29 days longer, with higher quality of life. Unfortunately, many people enroll in hospice too late to take advantage of all of its benefits. It is never too early to reach out and interview a hospice so you understand when and how it can help you and your loved one live life most fully. You can make the informational call yourself; a doctor's referral is not necessary.

Medicare and Medicaid pay for 100% of hospice care related to the person's primary diagnosis, and most private insurances have a hospice benefit, all of which includes access to a hospice team 24/7, medical equipment, and medications. Also, Medicare now has an option online that can help you compare hospice providers at <https://www.medicare.gov/hospicecompare/>.

So, please, don't wait to invest time in conversations, thought, and planning for the end of life. It is a gift to your family, your loved ones, and yourself that only you can give.

Jessica O'Leary is a gerontologist, instructor of the Savvy Caregiver Course, Care Coordinator at Halcyon Hospice & Palliative Care, and member of the Care Connections Editorial Advisory Committee.

“Great acts are made up of small deeds.”

-- Lao Tzu

Communicate

by Kim Mooney



Being a caregiver for a loved one presents unique challenges to communicating about difficult issues. Caregivers may become resentful that they must make big decisions on their own. Care receivers may feel defensive that they are becoming more vulnerable and losing their identities. And some conversations are just incredibly delicate. Important unspoken things build resentments and become impediments to having more difficult conversations in a timely way, before they become emergencies. So how do you address everyone's needs in ways that are clear and respectful and effective? I haven't brought this up before, but it's been weighing on my mind. It would help me to be able to talk about it now.

In any important discussion, be very clear about what you have to discuss. Break it down into small enough parts presented slowly enough that your loved one won't get overwhelmed with facts and emotions that will impact their lives.

Choose a time to talk when they're going to be able to listen. When is their best time of day? Where can you find a quiet spot? Can you block off enough time? *“I'd like to spend some time tomorrow morning talking about some plans for the future. Let's take some time before you leave for your group.”*

Some conversations may seem so overwhelming it's hard to know where to start. As much as possible, let the person know that you want their input but that some issues can't be ignored. *“This may be hard, but it's very important to me and I need your help. We have to look at some problems we're going to have to solve this year. We don't have to make any decisions right now, but*



we do need to start talking. If we wait to make a decision about this, we may end up with choices we don't like. I want to protect our future."

If it feels like a direct one-on-one conversation isn't going to work, you may have to be firm or engage other people to help you. *"I'd like to sit down with you and the kids and talk about some of the choices we might be making in the next couple of years. Sometimes they have ideas that we haven't thought about,"* or *"I want you to help me make this decision but if it doesn't work, I'm going to have to move forward on my own. I can't figure this out by myself and I'm going to ask the Senior Center resource specialist to recommend the right kind of professional to help me."*

There are three more very important things to remember. You're not being selfish to want as much of a satisfying life outside of caregiving duties as possible. In fact, it may be critical to your health and ability to keep doing what you're doing. *"I am grateful to be able to take care of you, and I wouldn't want it any different. But I am feeling pretty worn down, and I need your help with some ways that I can take care of myself better."*

Caregivers can become isolated and without other kinds of conversation and stimulation, it's easy to lose perspective or interest in life. Whether it's coffee with an old or new friend, or getting to church, or finding one new interest, this should not be something you ignore. Communicating that you have the need for variety or support is healthy and will remind others to help you keep your life in balance.

Finally, remember that the only person you talk to and listen to 24/7, 365 days of the year is yourself. More than any other factor, your self-talk is going to determine how you take care of anyone. *"I love my family member, but I'm the only one who knows what to do for me to stay healthy. It's OK to think of myself as much as I think of any-*

one else. I know what I need to do to enjoy my life, and I deserve it."

Kim Mooney is a Thanatologist, owner of Practically Dying, and an education consultant for The Conversation Project in Boulder County.

Guilt



by Sara Thomson

Guilt. It's not useful or productive, but unfortunately caregiving for an ailing or disabled loved one can inherently involve guilt of both parties: the cared-for and the caregiver. Guilt only causes unhappiness and discomfort, and it can get in the way of enjoying the time you have with your loved one. Let's talk about some ways to reframe guilty feelings for both you and your loved one, and dump that guilt!

Guilt about care needs. Someone in a position of needing help may have a lot of guilt about those needs. If that is an issue, reassure your loved one that you love and value them, and that their worth does not depend on their abilities or needs. You may need to remind them of this often, and that's okay.

Guilt about caregiving skills. If you feel guilty because you think your care skills aren't up to par, remember, just the gift of time and effort towards your loved one is enough. If you are feeling insecure about your caregiving skills, there are both online and in-person classes you can take to learn skills and gain confidence.

Guilt about "not doing enough." Make a list of everything you do for your loved one, even things as simple as hugs. Make a list of everything

(continued on page 13)



COMMUNITY RESOURCES

This column provides information about events, 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 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, please email InfoCaregiver@bouldercounty.org or call 303-678-6116. The deadline for the July/August 2018 issue is May 23.)

The annual **Caregiving Symposium** is just around the corner, on Thursday, May 17, 8:30 a.m. – 4 p.m., at the Plaza Convention Center, 1850 Industrial Circle, Longmont. Pre-register by May 9 for admission with lunch. After May 9, you may still do walk-in registration, but without lunch. Financial assistance for respite care is available. For more information, see page 14 in this issue, go to the event website at www.2018CaregivingSymposium.eventbrite.com, or contact Juliette Kershner at 303-678-6116 or InfoCaregiver@bouldercounty.org.

Boulder County Area Agency on Aging offers **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, rather than just survive, while caring for an older loved one, on Mondays, May 14 – June 25 (skipping Memorial Day), 1:30 – 4:30 p.m., location to be announced; and **National Caregiver Training Program**, an 18-hour course, taught by a registered nurse, that helps family caregivers acquire the practical skills

needed to provide safe, confident care for frail older loved ones, on Thursdays, July 12 – August 16, 5 – 8 p.m., between Longmont and Boulder. The courses are open to Boulder County residents who provide any level of care for a relative, partner, or friend who is 60 or over, or of any age if the person has dementia. (The courses are not open to professional caregivers.) 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.

AgeWell – Longmont United Hospital holds **Advance Directives workshops**, about considering and clarifying one's wishes for medical treatment in the event of incapacitation, on Thursdays, May 10 or June 14, 9:30 – 11 a.m. (\$5 fee for Longmont residents, \$6 for non-residents), at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. Pre-registration is required, at 303-651-8411.

Longmont Senior Services offers **Know Your Rights**, about what you need to know about life in a long-term care facility, presented by the Long Term Care Ombudsman program of Boulder County Area Agency on Aging, on Tuesday, June 12, 4:30 – 6 p.m.; **AARP Home Fit**, about practical methods for making a home more livable for the long-term, with Nicole Kain, of AARP Colorado, on Thursday, June 14, 9 – 10:30 a.m.; **Major Eye Disorders and Daily Life**, about eye disorders and resources for managing most effectively with vision loss, with Lynda McCullough, of Ensign Skills Center, on Thursday, June 14, 1 – 2 p.m.; and

When Does My Loved One Need More Care Than I Can Give at Home?, about considering the difficult choice of assisted living or memory care, with Kelli Squire, Dementia Support Specialist and Owner of About Time Senior Solutions, on Monday, June 18, 9 – 10:30 a.m.. All presentations are at Longmont Senior Center, 910 Longs Peak Avenue, Longmont. There is no charge, but pre-registration is required, at 303-651-8411.

Alzheimer's Association of CO offers **Healthy Living for Your Brain and Body**, on Tuesday, May 1, 10 – 11:30 a.m., at West Boulder Senior Center, 909 Arapahoe, Boulder, and on Thursday, May 10, 2 – 3:30 p.m., at Lafayette Library, 775 W. Baseline Road, Lafayette; **Understanding and Responding to Dementia-Related Behavior**, on Monday, May 14, 10:30 a.m. – 12 p.m., at Golden West, 1055 Adams Circle, Boulder, and on Sunday, May 20, 10:45 a.m. – 12:15 p.m., at First Presbyterian Church, 1820 15th Street, Boulder; **Effective Communication Strategies**, on Thursday, June 14, 6 – 7:30 p.m., at Lafayette Library (address above), and on Tuesday, June 19, 6 – 7:30 p.m., at Balfour at Cherrywood Village, 282 McCaslin Boulevard, Louisville; **The Basics: Memory Loss, Dementia, and Alzheimer's Disease**, on Tuesday, June 26, 10:30 a.m. – 12 p.m., at Erie Community Center, 450 Powers Street, Erie; **Living with Alzheimer's: For People with Alzheimer's Disease**, on Tuesdays, May 1, 8, and 15, 3 – 5 p.m., at Longmont Senior Center, 910 Longs Peak Avenue, Longmont; and **Dementia Conversations: Driving, Doctor Visits, Legal and Financial Planning**, on Tuesday, June 19, 3 – 4:30 p.m., also at Longmont Senior Center (address above). See class descriptions at www.alz.org/co

(Classes and Workshops / Classes / Boulder). Pre-registration is required at the website above, by calling the 24/7 Helpline at 800-272-3900, or by emailing hvolden@alz.org.

The Alzheimer's Association of CO also offers an **Early Stage Support Group** for people living with dementia, and their care partners, on eight consecutive Fridays, May 4 – June 29, 10 – 11:30 a.m., at Heart of Longmont United Methodist Church, 350 11th Avenue, Longmont. The group will fill quickly; contact Ralph Patrick, at 303-813-1669, ext. 362, or rpatrick@alz.org to schedule an initial consultation. Also for persons with early stage dementia, the Alzheimer's Association offers **Memory Cafés**, welcoming events where people living with memory loss and their care partners can come together for socialization and education, on Sundays, May 13 and June 10, 1:30 – 3:30 p.m., at Museum of Natural History, CU – Henderson Building, 1030 Broadway, Boulder; on the third Monday of each month, 1 – 2:30 p.m., at First United Methodist Church, 1255 Centaur Village Drive, Lafayette; on the first Monday of each month, 10 – 11:30 a.m., at Louisville Senior Center, 900 Via Appia Way, Louisville; and on the fourth Wednesday of each month, 3 – 4:30 p.m., at Lafayette Senior Center, 103 S. Iowa, Lafayette. For more information about these and other Early-Stage programs, call the Helpline at 800-272-3900.

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



Guilt

(continued from page 10)

else you have to do in your life. Seeing in writing how much love and effort you are putting in can help assuage guilt.

Guilt about taking time for self-care. Family caregivers have a higher risk of a number of negative health outcomes, particularly those involving self-care, like seeing the doctor or dentist, getting good nutrition, exercising, or finding quiet time. If you're feeling guilty about taking time for yourself, try to put yourself in the place of the loved one you're caring for. They most likely would want you to take care of yourself, and it might make them feel guilty because you're not. They might also like a break from *you*! Previous issues of *Care Connections* have discussed ways to get affordable respite care so that you can take breaks if your loved one can't be alone. In any relationship, the individuals need time to themselves. It is okay to want a break!

Guilt about difficult feelings. Sadness, grief, anger, resentment: these are all normal feelings that one has when seeing a loved one who is ill, suffering, or in decline, especially when placed in the position of needing to care for them. No feeling that you have is wrong or bad. You have every right to have complicated emotions, and they don't mean that you love your care recipient any less. If you are having persistent or debilitating guilt over feelings, it might help to see a therapist or peer counselor, or to attend a support group. It can be especially helpful to work through issues with others whose experiences have been similar.

Guilt trippin'. So what if your loved one is causing your guilt? They are likely frustrated with their own loss of functioning and independence. Learning how to set solid boundaries and work through the issue of guilt trips can be a big chal-

lenge. If you are experiencing a lot of "guilt trips" from your loved one, it may be a good idea to see a family therapist or mediator. Having a neutral third party can really foster honest communication and navigation of boundaries.

In closing, while it is natural and normal to feel some guilt during a caregiving journey, it is best for your well-being—and your loved one's—to find a way to dump that guilt! Any way that you support your loved one is valuable, and none of us is perfect. Honor yourself and your relationship with the person that you care for, and be gentle with your own imperfections.

Sara Thompson has worked with older adults and their family caregivers since 2002, managing a home care agency, volunteering, and facilitating a caregiver support group. She is a member of the Care Connections Editorial Advisory Committee. See the back page of this issue for ways to learn more about the resources mentioned in this article.

“I have come to believe that caring for myself is not self-indulgent. Caring for myself is an act of survival.”

-- Audre Lorde



PACE

Program of All-inclusive Care for the Elderly

Caregiving Symposium

An educational event for family and friends of older adults

Thursday, May 17

8:30 a.m. – 4 p.m. (come for all or part)

Plaza Convention Center, 1850 Industrial Circle, Longmont

Resource Fair (8:30 a.m. – 3 p.m.) / Educational Materials

Complimentary Lunch (for pre-registered guests)

WORKSHOPS

Communication in Early Stages of Memory Care / Love Doesn't Conquer All / Caregiver Resources /
 Transcending Dementia: Spirituality and the Self / Mindfulness in Caregiving /
 Options in Continuum of Care / Death Care and Natural Funeral Options /
 Neuropsych Testing for Dementia / Caregivers Who've Negotiated Challenges /
 Navigating Difficult Conversations / And More

General Registration is FREE.

Register at 303-441-1685 or www.2018CaregivingSymposium.eventbrite.com by May 9 to receive lunch.

Walk-in registration is welcome, but does not include lunch.

Financial assistance for respite care is available; call 303-678-6284.

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 Golden West Senior Living / Hover Senior Living / Landmark - A Memory Care Community /
 ManorCare Health Services / Synergy HomeCare

A Day Place / The Alzheimer's Association of Colorado / Audio Information Network of Colorado /
 Boulder Medical Center / BrightStar Care / Broomfield Skilled Nursing and Rehab / CapTel Outreach /
 Compassionate Home Health Care and Hospice / Dignity Care / DORA (Dept of Regulatory Agencies) Division of Insurance /
 Edward Jones Investments / Elms Haven Center – Genesis / Halcyon Hospice & Palliative Care / Hearing Health Care Centers /
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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
Niwot area	303-441-1617
Superior	303-441-1617

