

The Caregiver Toolbox

Family Dynamics and Aging

Characteristics of Families

- **Every family is unique.**
- **Cultural diversity** exists in families and in our country. It is important to examine our cultural heritage when examining our families.
- **Membership in families is not voluntary.** Like it or not we are born into them and for most, those bonds are very strong.
- **The past is important in families.** Past events, conflicts, relationships and bonds can have an influence on current concerns.
- **Families are complex** to start with but some issues which make them more complex are longevity, number of generations in a family, divorce & remarriage.
- **Most people have difficulty stepping back and viewing their own families impartially.** This is especially true with the parent-child bond.



Myths & Realities of Families & Caregiving

Myth- In the good old days, families took care of their own members-not like today.

Reality-In the good old days, the average life expectancy was in the 50's. Families had very few older family members. There were no formal services so families had no choices about assistance for the most part.

Myth- Today families are not involved in providing assistance to older members.

Reality-Survey after survey shows family contact is very frequent for most older and disabled adults. Families are involved in the care for over 90% of both those living at home and those in a care facility.

Common Challenges in Families & Caregiving

Spouses Providing Care

Staying Healthy

- Spousal caregivers often face the huge challenge of staying healthy themselves.
- Often they neglect their own health because they feel that no one else is able to care for their spouse like they do. In fact, they often do provide the best quality of care. Sometimes adult children do not see how much care is actually being provided by the well spouse. Spouses often need to allow others to help care for the individual in order to take care of their own physical or mental needs.

Guilt Feelings

Types of guilt which are typical in spouses:

- Guilt for not doing enough
- Guilt for forbidden feelings(anger, resentment, dislike)
- Survivor guilt(guilt for being healthy while the other person is not)

Suggestions for coping with guilt feelings.

- Identify the source of the guilt
- Identify what is currently being done
- Look at what can realistically be done
- Identify when anger and blame are actually guilt
- Give permission to oneself to not be perfect

Intense Range of Emotions

Four emotions which are very common in caregiving spouses:

- Ambivalence
- Anger
- Fear
- Worry/anxiety

Sometimes spouses report they feel like they are on a roller coaster of emotions. This can cause stress and eventual burnout. Talking with other spouses in similar situations can be very helpful. Taking a break from caregiving can also relieve this stress.

Adult Children Providing Care

Relationship Role Changes

- Ill people often cannot perform tasks that they have for many years. Adult children often face difficult choices as they assume duties formerly completed by their older parents.
- Parents sometimes respond with anger towards the son or daughter who is taking over tasks and responsibilities.

To minimize the negative effects of role changes it is best to:

- Change roles as *gradually* as possible especially when the ill person has been doing a certain task for many years.
- Allow ill persons to have as *much* control as possible. Sometimes adult children must see beyond their own worries about health & safety to allow the ill person to continue in a role which has been meaningful.

Differences in Motivations-Safety vs. Independence

- In many families, there is a very real difference between the adult children's desire for safety & the parents' desire for as much independence as possible.
- These dueling motivations can create anger and resentment on both sides. It can also cause communication to be impaired as parents choose not to let children know about falls, problems and other issues to avoid losing more independence.
- Families often must acknowledge that this different motivation exists and then move towards finding a middle ground in which children allow risk and parents retain as much independence as possible.

Inclusion of Other Generations in Caregiving Responsibilities

- Adult children are often very reluctant to involve their own children in caregiving.
- Some of the reasons could be: "they are so busy, they have their own lives, they have small children". However grandchildren and great-grandchildren can make valuable contributions to a situation:
- They often bring energy and different kinds of assistance and support(i.e. knowledge of technology, their own small children who can cause joy)
- They change and often enhance the family dynamics. Involving them and allowing them to contribute often builds stronger bonds within the family.

Issues Between Adult Siblings

Unresolved Sibling Rivalry

- Sibling rivalry which existed in the childhood and teenage years either gets resolved or goes below the surface in adulthood.
- It often resurfaces when one or both parents need assistance. It complicates caregiving because it brings anger and resentment rooted in the past into the process. Sometimes rivalry can be resolved to some extent by being acknowledged and sometimes it can be ignored successfully.

Every family will find its own unique solution.

Inheritance Concerns

- Inheritance concerns take different forms in different families. Sometimes it is the money, sometimes it is the house, sometimes it is the things in the house.
- Sometimes it is not the adult children who are concerned but the parents. Sometimes other relatives are involved. These concerns can greatly complicate the caregiving scenario and the choices made.
- Families need to discuss these issues clearly and without anger. Parents should put wishes in writing. Often legal advice can be useful in helping families to draw up appropriate documents and make decisions around inheritance.

Differences in Perception of Needs and Care

- Different relatives perceive needs and care choices differently. All can be perfectly valid choices in the face of disabling illness.
- However, these differences often cause conflict in families especially between siblings. Siblings need to honestly discuss all options and try to understand each other's positions even if they do not agree with them. Sometimes consensus only emerges after these discussions. Sometimes people have to agree to disagree.
- What is most important is to come to the decision which best meets the needs of the ill person(s).

Common Communication Obstacles In Families

So Many Things Left Unsaid...

Families often do not discuss the issues around illness and caregiving. Some reasons are:

- We expect people to know without us saying.
- We don't want to argue.
- The truth is difficult to face.
- We don't want to complain.
- We don't want to hurt others.

"Dance" Between Guilt and Resentment

- On the one hand, people can be somewhat resentful for the time they spend providing care, for what is happening to their lives, or for what they are giving up to provide care.
- On the other hand, they feel guilty for not doing enough because they love their family member. They keep going back and forth between the two and effective communication does not happen. Instead the cycle continues and can intensify.

Relevance of the Past

- Past hurts, relationships, events etc. have an impact on present events in families. Often these past events have not been resolved to the satisfaction of all parties and there are hidden feelings involved.
- Past trauma especially results in buried emotions. Sometimes it is said that people "build a wall around their emotion" after trauma. It can be difficult to communicate if there has been trauma, abuse, secrets, or other unresolved issues in a family's past. People may need to involve professional counseling or mediators to assist in productive communication in these incidences.



Techniques to Overcome Obstacles

Identification of Family Strengths

- It can be very helpful to identify family strengths, whatever they may be.
- So often families are stressed and not communicating effectively that all they see is the problems. It can be difficult to recognize the positive that is happening and has happened. Every family has strengths that can be brought to the caregiving process.
- Some examples are: the number of people, skills that members possess, a long history of family closeness, geographic proximity to each other.

Use of “I” Statements

Use “I” messages. Start statements with “I feel”, “I need”, “I am frustrated...” etc. instead of “You.” This tends to keep both sides from getting defensive.

Active Listening

- Active listening can help all parties feel understood even if they do not agree. It can diffuse potentially stressful situations and allow people to communicate honestly.
- The steps of active listening include:
 - Give the speaker your full attention.
 - Encourage the person to speak.
 - Confirm what you heard the person say.
 - Ask open ended questions to clarify.
 - Acknowledge the person’s feelings even if you don’t agree with his/her statements.
 - Make certain all concerns have been heard before responding.

Hold a Family Meeting

Suggestions concerning family meetings:

- Don't forget to include long-distance family/caregivers if possible.
- Include adult 3rd and 4th generation family members if available. They often bring a productive dynamic to the discussion and a current knowledge of technology.
- Set ground rules for the meeting so that *only* issues that apply to the current concerns are brought into the discussion (i.e. leaving out old arguments, past issues etc.)
- Appoint a mediator who will move the discussion along. This can be someone from the family, a close friend or it can also be appropriate to hire someone who specializes in these issues. Everyone should have a chance to share and listen to the others.



This information is provided by: The National Family Caregiver Support Program



This is a nationally funded program operated in Central Ohio by the Central Ohio Area Agency on Aging (COAAA). It offers caregiver workshops and funds services designed to assist caregivers on a short term basis. The services include: information and assistance, counseling, respite, and other supplemental services.

Request a copy or download our other guides:

- Central Ohio Older Adults Resource Guide
- The Caregiver Toolbox
- Central Ohio Long Term Care & Hospice Guide
- Central Ohio Housing & Home Repair Guide
- Central Ohio Private Homecare Guide
- Central Ohio Utility Guide
- Central Ohio Prescription Guide
- Central Ohio Transportation Guide
- Central Ohio Support Group Guide
- Central Ohio Respite Guide
- Central Ohio Moving & Transitions Guide
- Books, Videos, and Websites for Family Caregivers.
- Central Ohio Kinship Care Guide
- Central Ohio Hiring Guide for In Home Caregivers
- Central Ohio Pet Care Guide

The COAAA also provides monthly Caregiver Support Groups & Information Sessions. For more information, call 1-800-589-7277 or visit www.coaaa.org.

Or in your county, call one of these agencies:

- **Delaware**-SourcePoint 740-363-6677
- **Fairfield**-Meals on Wheels Older Adult Alternatives 740-681-5050
- **Fayette**-Community Action Commission of Fayette Co. 740-335-7282
- **Franklin**-Franklin Co. Office on Aging 614-525-6200
- **Licking**-Licking Co. Aging Program 740-345-0821 or 1-800-452-0097
- **Madison**-Madison Co. Senior Center 740-852-3001
- **Pickaway**-Pickaway County Senior Center 740-474-8831
- **Union**-Union County Senior Services 937-644-1010