

**“CHECK YOURSELF BEFORE YOU
WRECK YOURSELF”**

Strategies for taking care of YOURSELF-

Especially when you have to take care of Others

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PURPOSE AND OBJECTIVES

- To take care of ones' self mentally, physically, spiritually, financially and emotionally FIRST
- To ensure that holistic care is a part of one's lifestyle
- To ensure that you don't get caught in "the vacuum of life"
- To ensure that you reach your personal goals and objectives so that you can be happy, healthy and fabulous as we prepare for the Kingdom

THE RESEARCH: STUDIES DEMONSTRATED THE FOLLOWING:

- **Hypothesis: Decline in caregiver health:** Caregiving can have strong implications for health and wellbeing given the strain and burden associated with the role. Maintaining activity engagement is important for late-life health and wellbeing, and may be a possible contributing mechanism to caregiver health and wellbeing.
- **Results:** Caregiving status was associated with declines in physical activity engagement over time. Older age was associated with fewer physical and more self-care and passive activities.

THE RESEARCH: STUDIES DEMONSTRATED THE FOLLOWING:

- **Hypothesis:** Clinicians, researchers and politicians are seeking to better assess caregiver's needs.
- **Results:** Assessing caregivers' needs is a key part in providing caregivers with appropriate support.

THE RESEARCH: STUDIES DEMONSTRATED THE FOLLOWING:

- **Hypothesis:** Patients and caregivers who use high levels of adaptive religious coping and low levels of maladaptive religious coping, cope better than their counterparts.
- **Results:** In line with the hypotheses, results demonstrated that greater maladaptive religious coping was associated with fewer family therapy sessions attended. Contrary to expectations, greater adaptive religious coping was also associated with attending fewer family therapy sessions.

THE RESEARCH: STUDIES DEMONSTRATED THE FOLLOWING:

- **Hypothesis:** Rural caregivers more frequently had financial barriers than urban caregivers, but the prevalence of health barriers was similar. After adjusting for demographic differences, financial barriers remained more common among rural caregivers.
- **Results:** Rural caregivers were less likely than their urban peers to report that caregiving created any difficulty.

THE RESEARCH: STUDIES DEMONSTRATED THE FOLLOWING:

- **Findings:** Fifty-two percent of caregivers reported scores consistent with risk for clinical depression and severe sleep problems. Less functional coping, optimism, mastery, neuroticism, and sleep predicted 66.4% of the variance in depression.
- **Results:** Findings suggest there are far more similarities than differences between caregivers of individuals who have cancer and caregivers of those who have dementia. Caregiver personality and coping strategies appear to be related to caregiver outcomes similarly in the cancer and dementia populations.

IDENTIFIABLE PROBLEMS

- **Caregiver burden** has also been defined as the strain or load borne by a person who cares for a chronically ill, disabled, or elderly family member (Stucki & Mulvey, 2000). It is a multidimensional response to physical, psychological, emotional, social, and financial stressors associated with the **caregiving** experience.

IDENTIFIABLE PROBLEMS

- SELF PRESERVATION: If you don't take care of you, then;
- Who will?
- How can you take care of others?
- What is God's best for you?

IDENTIFIABLE PROBLEMS

- Time
- Finances
- Overburdened
- Lack of delegation
- Lack of assistance
- A Spiritual problem (The Holy Spirit's role)
- Other (Lazy, tired, overwhelmed...)

FACTS

- If you are a caregiving spouse between the ages of 66 and 96 and are experiencing mental or emotional strain, you have a risk of dying that is 63 percent higher than that of people your age who are not caregivers.¹ The combination of loss, prolonged stress, the physical demands of caregiving, and the biological vulnerabilities that come with age place you at risk for significant health problems as well as **an earlier death.**

FACTS

- Older caregivers are not the only ones who put their health and well-being at risk. If you are a baby boomer who has assumed a caregiver role for your parents while simultaneously juggling work and raising adolescent children, you face an **increased risk for depression, chronic illness, and a possible decline in quality of life.**

FACTS

- Caregivers are more likely to have a chronic illness than are non-caregivers, namely high cholesterol, high blood pressure, and a tendency to be overweight. Studies show that an estimated **46 percent to 59 percent of caregivers are clinically depressed.**

FACTS

Caregivers Report:

- Sleep deprivation
- Poor eating habits
- Failure to exercise
- Failure to stay in bed when ill
- Postponement of or failure to make medical appointments for themselves

FACTS

- Caregiving can be an emotional roller coaster. On the one hand, caring for your family member demonstrates love and commitment and can be a very rewarding personal experience. On the other hand, exhaustion, worry, inadequate resources, and continuous care demands are enormously stressful.

PROBLEMS ASSOCIATED WITH CARING FOR OTHERS

- **Mental health concerns**
 - Depression
 - Anxiety
 - Subclinical stress
 - High rates of negative affect including guilt, sadness, dread, worry.
Ambivalence about care
 - Witnessing the suffering of relatives

PROBLEMS ASSOCIATED WITH CARING FOR OTHERS

- **Health concerns**
 - Fatigue Sleep problems
 - Risk of illness
 - Injury, mortality

PROBLEMS ASSOCIATED WITH CARING FOR OTHERS

- **Functional impairment**
- **Secondary strains**
 - Work – employment
 - Financial strains
 - Relationship stress
 - Loss of time for self-care
 - Reduced quality of life
- **Care decisions**
 - “When is it time” for various services?
 - Residential placement
 - End of life care planning

PROBLEMS ASSOCIATED WITH CARING FOR OTHERS

- **Resources and eligibility for services**
 - Housing
 - Healthcare
 - Community services
 - Respite
- **Family challenges**
 - Conflict about care
 - Lack of support for caregiver
 - Balancing needs of healthy and sick family members
 - Behavioral issues
 - Interpersonal conflicts

PROBLEMS ASSOCIATED WITH CARING FOR OTHERS

- **Advocacy for care**
 - Lack of cooperation by care recipient
 - Interface with service systems
 - Coordinating systems

QUESTIONS

- Do you think you are being selfish if you put your needs first?
- Is it frightening to think of your own needs? What is the fear about?
- Do you have trouble asking for what you need? Do you feel inadequate if you ask for help?
- Do you feel you have to prove that you are worthy of the care recipient's affection? Do you do too much as a result?

QUESTIONS

- Sometimes caregivers have misconceptions that increase their stress and get in the way of good self-care. Here are some of the most commonly expressed:
- I am responsible for my parent's health.
- If I don't do it, no one will.
- If I do it right, I will get the love, attention, and respect I deserve.
- Our family always takes care of their own.
- I promised my father I would always take care of my mother.

COPING MECHANISMS

- **First, Care for Yourself**

On an airplane, an oxygen mask descends in front of you. What do you do? As we all know, the first rule is to put on your own oxygen mask before you assist anyone else. Only when we first help ourselves can we effectively help others. Caring for yourself is one of the most important—and one of the most often forgotten—things you can do as a caregiver. When your needs are taken care of, the person you care for will benefit, too.

COPING MECHANISMS

- **Taking Responsibility for Your Own Care**

You cannot stop the impact of a chronic or progressive illness or a debilitating injury on someone for whom you care. But there is a great deal that you can do to take responsibility for **your personal well-being and to get your own needs met.**

COPING MECHANISMS

- **Identifying Personal Barriers**

Many times, attitudes and beliefs form personal barriers that stand in the way of caring for yourself. Not taking care of yourself may be a lifelong pattern, with taking care of others an easier option. However, as a family caregiver you must ask yourself: “What good will I be to the person I care for if I become ill? If I die?”

TOOL 1

Asking for and Accepting Help

- When people have asked if they can be of help to you, how often have you replied, “Thank you, but I'm fine.” Many caregivers don't know how to marshal the goodwill of others and are reluctant to ask for help. You may not wish to “burden” others or admit that you can't handle everything yourself.

COPING MECHANISMS

- Breaking old patterns and overcoming obstacles is not an easy proposition, but it can be done—regardless of your age or situation. The first task in removing personal barriers to self-care is to identify what is in your way.

COPING MECHANISMS

Moving Forward

- Once you've started to identify any personal barriers to good self-care, you can begin to change your behavior, moving forward one small step at a time. Following are some effective tools for self-care that can start you on your way.

ME TIME!

- Plan out some “me and HIM” time EVERY DAY!
 - Put God first in EVERYTHING that you do...and watch Him work....
- Plan out some “me time” each week!

TOOL 2

Reducing Personal Stress

How we perceive and respond to an event is a significant factor in how we adjust and cope with it. The stress you feel is not only the result of your caregiving situation but also the result of your perception of it—whether you see the glass as half-full or half-empty. It is important to remember that you are not alone in your experiences.

STRESS

- Your level of stress is influenced by many factors, including the following:
- Whether your caregiving is voluntary. If you feel you had no choice in taking on the responsibilities, the chances are greater that you will experience strain, distress, and resentment.
- Your relationship with the care recipient. Sometimes people care for another with the hope of healing a relationship. If healing does not occur, you may feel regret and discouragement.
- Your coping abilities. How you coped with stress in the past predicts how you will cope now. Identify your current coping strengths so that you can build on them.
- Your caregiving situation. Some caregiving situations are more stressful than others. For example, caring for a person with dementia is often more stressful than caring for someone with a physical limitation.
- Whether or not support is available.

STRESS

- **Steps to Managing Stress**
- Recognize warning signs early. These might include irritability, sleep problems, and forgetfulness. Know your own warning signs, and act to make changes. Don't wait until you are overwhelmed.
- Identify sources of stress. Ask yourself, “What is causing stress for me?” Sources of stress might be that you have too much to do, family disagreements, feelings of inadequacy, or the inability to say no.
- Identify what you can and cannot change. Remember, we can only change ourselves; we cannot change another person. When you try to change things over which you have no control, you will only increase your sense of frustration. Ask yourself, “What do I have some control over? What can I change?” Even a small change can make a big difference.

TOOL 3

- **Setting Goals**
- Setting goals or deciding what you would like to accomplish in the next three to six months is an important tool for taking care of yourself. Here are some sample goals you might set:
- Take a break from caregiving.
- Get help with caregiving tasks like bathing and preparing meals.
- Engage in activities that will make you feel more healthy.

TOOLS

- Goals are generally too big to work on all at once. We are more likely to reach a goal if we break it down into smaller action steps. Once you've set a goal, ask yourself, “What steps do I take to reach my goal?” Make an action plan by deciding which step you will take first, and when. Then get started!
- *Example* (Goal and Action Steps):
Goal: Feel more healthy.
Possible action steps:
 - Make an appointment for a physical checkup.
 - Take a half-hour break once during the week.
 - Walk three times a week for 10 minutes.

TOOL 3

Seeking Solutions

Seeking solutions to difficult situations is, of course, one of the most important tools in caregiving. Once you've identified a problem, taking action to solve it can change the situation and also change your attitude to a more positive one, giving you more confidence in your abilities.

TOOL 4

Talking to the Physician

- In addition to taking on the household chores, shopping, transportation, and personal care, 37 percent of caregivers also administer medications, injections, and medical treatment to the person for whom they care. Some 77 percent of those caregivers report the need to ask for advice about the medications and medical treatments. The person they usually turn to is their physician.

TOOLS

- Consider the person's special abilities and interests. If you know a friend enjoys cooking but dislikes driving, your chances of getting help improve if you ask for help with meal preparation.
- Resist asking the same person repeatedly. Do you keep asking the same person because she has trouble saying no?
- Pick the best time to make a request. Timing is important. A person who is tired and stressed might not be available to help out. Wait for a better time.
- Prepare a list of things that need doing. The list might include errands, yard work, or a visit with your loved one. Let the “helper” choose what she would like to do.

TOOL 5

Communicating Constructively

Being able to communicate constructively is one of a caregiver's most important tools. When you communicate in ways that are clear, assertive, and constructive, you will be heard and get the help and support you need. The box below shows basic guidelines for good communication.

TOOLS

- Use “I” messages rather than “you” messages. Saying “I feel angry” rather than “You made me angry” enables you to express your feelings without blaming others or causing them to become defensive.
- Respect the rights and feelings of others. Do not say something that will violate another person's rights or intentionally hurt the person's feelings. Recognize that the other person has the right to express feelings.
- Be clear and specific. Speak directly to the person. Don't hint or hope the person will guess what you need

TOOL 6

Starting to Exercise

- You may be reluctant to start exercising, even though you've heard it's one of the healthiest things you can do. Perhaps you think that physical exercise might harm you, or that it is only for people who are young and able to do things like jogging. Fortunately, research suggests that you can maintain or at least partly restore endurance, balance, strength, and flexibility through everyday physical activities like walking and gardening. Even household chores can improve your health. The key is to increase your physical activity by exercising and using your own muscle power.

COPING MECHANISMS

- Mobilization of resources in locations where caregivers of the elderly live are greatly needed.
- Health authorities should provide devices and essential training to manage the common problems and emergencies that informal caregivers have to deal with.
- Caregivers need follow-up supervision by a home visit team.

TOOL 7

Identify the problem

- Look at the situation with an open mind. The real problem might not be what first comes to mind. For example, you think that the problem is simply that you are tired all the time, when the more basic difficulty is your belief that “no one can care for John like I can.” The problem? Thinking that you have to do everything yourself.
- List possible solutions. One idea is to try a different perspective: “Even though someone else provides help to John in a different way than I do, it can be just as good.” Ask a friend to help. Call Family Caregiver Alliance or the Eldercare Locator (see Resources list) and ask about agencies in your area that could help provide care.
- Select one solution from the list. Then try it!

TOOL 8

- **Evaluate the results**
- Ask yourself how well your choice worked.
- Try a second solution. If your first idea didn't work, select another. But don't give up on the first; sometimes an idea just needs fine-tuning.
- Use other resources. Ask friends, family members, and professionals for suggestions.
- If nothing seems to help, accept that the problem may not be solvable now. You can revisit it at another time.

TOOL 8

Learning from Our Emotions

- Caregiving often involves a range of emotions. Some feelings are more comfortable than others. When you find that your emotions are intense, they might mean the following:
- That you need to make a change in your caregiving situation.
- That you are grieving a loss.
- That you are experiencing increased stress.
- That you need to be assertive and ask for what you need.

SUMMING IT UP....FINALLY BRETHREN...

- Participate in pleasant, nurturing activities, such as reading a good book, taking a warm bath.
- Seek and accept the support of others.
- Seek supportive counseling when you need it, or talk to a trusted counselor, friend, or pastor.
- Identify and acknowledge your feelings, you have a right to *ALL* of them.
- Change the negative ways you view situations.
- Set goals.

SUMMING IT UP...FINALLY BRETHREN...

- Remember, it is not selfish to focus on your own needs and desires when you are a caregiver—it's an important part of the job. You are responsible for your own self-care. Focus on the following self-care practices:
- Learn and use stress-reduction techniques, e.g. meditation, prayer, yoga, gym time.
- Attend to your own healthcare needs.
- Get proper rest and nutrition.
- Exercise regularly, even if only for 10 minutes at a time.
- Take time off without feeling guilty.

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