



Caregivers and Caring for Persons in Need

Caregiving is helping a person accomplish the activities of daily living. The person is unable to accomplish these activities independently and the help provided enables him or her to maintain dignity and well-being. Caregiving can range from straightforward tasks such as providing a meal or doing someone's laundry, to 24 hour care and supervision that can include assuming full responsibility for an person's personal, medical and financial matters. The tasks or roles the caregiver takes on depend on the needs and abilities of the person receiving care.

Who needs caregiving?

Many types of people at different stages of life might need a caregiver.

- a child with a developmental delay in the school system whose assistant accompanies her through the school day
- a widowed and retired 65-year-old man whose teenage granddaughter visits him every noon hour through the week to "have lunch with him, to keep him company and make sure he eats his noon meal"
- a 78-year-old woman following recovery from a stroke visited in hospital every day by her daughter and husband who are helping her to make plans for her return home
- an 86-year-old man whose wife has just learned he has a "dementia", confirming her impression that his memory and judgement were "getting worse".

Who are caregivers?

An "informal" or "family" caregiver is one who is an unpaid family member. The primary caregiver is the one who provides the majority of the help and often has the closest relationship with the person needing care. The primary caregiver is often also the person with the enduring Power of Attorney and who has legal authority to make decisions on behalf of the person if he or she is not competent to do so.

There are natural caregivers, obliged caregivers, and there are reluctant caregivers; sometimes a single caregiver can think he is both on any given day.

The risks of caregiving

The rewards of caregiving can be felt even by the most reluctant caregiver over time. There are risks to caregiving, however, that can affect the physical and emotional health of the caregiver. Some caregivers, particularly the "naturals", can easily overdo it. People feel useful and good about themselves when providing care and they can receive a lot of respect and positive regard from others for their caregiving role. The formal caregiver's job satisfaction depends on these two factors.

Both formal and informal caregivers, however, can burn out, from demands that are too great or difficult, last too long, and/or might be more than the caregiver can cope with. Signs of burnout include physical and emotional exhaustion, decreased satisfaction in the "job", and a sense of detachment from the

person to whom care is being provided. Caregivers who always put themselves in the caregiver role are particularly at risk for burnout. Beliefs such as "I should be able to help everyone"; "I would be selfish if I thought myself first", "I am inadequate if I have to ask for help." or "Only I can provide the right care because I know my mother/husband best" might signal a need for the caregiver to think about whether she is at risk.

The stress of caring for a person with a dementia puts the caregiver at higher risk for health and emotional problems than she might be otherwise. She may be feeling impatient and angry with his constant and repetitive questioning and his "stubborn" unreasonableness – feelings about which she then feels guilty. She may not be sleeping well because of her own health problems and be feeling frustrated that constant supervision of her husband leaves her with little time to attend to her own mental or physical health and enjoyment. If she feels unable to cope, she will also feel anxious and self-critical which in turn can contribute to problems in eating, sleeping and general self-care.

Why the caregiving needs to care for him or herself

- About one-third of the population over 18 is involved in caregiving at some level. At least 40% are male.
- Caregiving lasts for an average of 8 years and can "last" for up to 18 years.
- In the US, the "free" caregiving services are estimated to be worth twice the amount spent on paid home care and nursing home services.
- There is a 63% higher mortality rate among older caregivers of spouses, who have a chronic illness themselves and who experience caregiving-related stress.
- A family caregiver's immune system is negatively affected for up to 3 years after caregiving ends, increasing chances of their developing a chronic illness.
- Spouses, who provide more than 36 hours of caregiving, have rates of depression and anxiety that are 6 times higher than in non-caregivers. In adult children caregivers, the rate is twice as high as it is in non-caregivers.

Psychologists are trained to assess how a person is coping with stress and whether the stressor or problems in coping have led to mental health problems or disorders (depression, anxiety). Psychologists can also help caregivers by:

- providing psychoeducation about chronic or debilitating illness and its effects on physical and mental well-being
- training caregivers to cope better and to better manage challenging behaviours of their care receivers
- providing individual supportive therapy for the caregiver who might have developed a mental health problem
- facilitating support groups or consulting to peer-led groups