

CAREGIVER TRAINING ADDRESSES PERSONAL CARE

Caregivers take on many different roles as they provide care to others. They may be the pharmacist- dispensing the correct medication, in the correct dose, at the correct time, via the correct route and for the correct reason; or they may feel as though their role is one of interpreter, listening to a myriad of medical terms, looking them up and trying to understand the implications each has on the future of the person they are caring for; or they may be the memory prompter- offering reminders for the person in their care to do as much for themselves as they can. All of these roles might be a bit awkward at first- but most family members fall into their role with grace and the knowledge that they are providing a needed support. That is until it is time to assist their care receiver with personal cares. I know that in my own personal experience of caring for family members, all of the other roles were quite acceptable and it was natural to assume those responsibilities. Once the care evolved into helping with personal cares, specifically bathing and toileting, the comfort level eroded. Family members are just not that comfortable helping with these needed cares. I have found that a major obstacle is the emotion providing this kind of care evokes.

Modesty can get in the way of offering help, but I think it signals a greater emotion. Providing this kind of care signals a greater need by the person you are helping- maybe a chronic disease has progressed to a new level. Maybe the person you are caring for has an

unexpected and unwanted decline. Whatever the reason, this new level of assistance marks a new milestone. I remind family caregivers that the person in their care would really rather be able to do all of these things themselves- they are not declining intentionally. The more we can relay an attitude of confidence the better received our help will be. When caring for my own mother she would often say things like- “I am such a burden to you girls!” or “I feel so helpless.” These statements were not only an expression of her feelings, but she was also seeking reassurance that we were helping her because we wanted to. And, of course, we wanted to give her care that she needed.

I would lighten the mood by saying things like, “how many times did you do this for all of us?” (she had 9 children!) or “hey mom, what goes around comes around!” She would smile and we would get on to the task of getting her freshened up. I advise family members that receiving this kind of care is just as, if not more uncomfortable for the care receiver, so let’s make the best of it! If you find yourself in this situation or know of someone who is providing this level of care, but is unsure of how to do it, recommend the caregiver training class to them! We help caregivers build their confidence by teaching these caregiving skills. We even get to share a few laughs along the way!

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