

CAREGIVER TLC

Thrive Learn Connect

Facilitator's Guide

Strategies for Stress Dealing with the Blues Bouncing Back Filling the Well Coping with Frustration All By Myself -

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OPTIMAL AGING CENTER

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ABOUT THIS MANUAL	4
STRATEGIES FOR STRESS	9
SLIDE 4 TODAY'S TOPICS	
SLIDE 5 STRESS & CAREGIVING	
SLIDE 8 YOUR STRESS SIGNS	
Slide 9 Deep Breathing	
Slide 14 Take Away	
Slide 15 Making This Work for You	
DEALING WITH THE BLUES	
Slide 4 Today's Topics	
Slide 5 Caregiving & Your Mood	
SLIDE 7 TAKING BACK CONTROL WITH POSITIVE ACTIVITIES	
Slide 13 Revising Your List	
Slide 15 Take Away	
Slide 16 Making This Work for You	
BOUNCING BACK	
SLIDE 4 TODAY'S TOPICS	
Slide 5 Bouncing Back	
Slide 6 Creating Balance	
Slide 9 Looking at Your Support Team	
Slide 25 Take Away	
Slide 26 Making This Work for You	
FILLING THE WELL	
SLIDE 4 TODAY'S TOPICS	54
Slide 6 Caregiving & Well-being	54
Slide 8 Self-Care	56
Slide 10 Quality Sleep	57
Slide 19 Take Away	65
Slide 20 Making This Work for You	
COPING WITH FRUSTRATION	
SLIDE 4 TODAY'S TOPICS	
Slide 5 Positive & Negative Emotions	70
Slide 8 Range of Anger	72
Slide 10 Taking 10 Deep Breaths	74
Slide 14 Take Away	
Slide 15 Making This Work for You	
ALL BY MYSELF	
Slide 4 Today's Topics	
Slide 5 Meaningful Connections Matter	
Slide 18 Review: Stress	
SLIDE 25+ CELEBRATION	

Table of Contents

About this Manual

Session Summary Page

First page of each Session is a summary provided for the Facilitator's use. It is not intended to be shared with the participants. It is a quick orientation to the material about to be presented. It contains the aim, handouts, main points, activities, and action plan options.

Considerations

This section offers additional information on the content on that slide. They can offer background, special issues, or pointers that can help facilitators to deliver the specific information on that slide.

Material

This is the content to be delivered. You may use your own words as long and the content is conveyed. The material is more accessible to the participant if it is not just read.

Stop & Ask



The Stop & Ask graphic contains brief questions to help the facilitators engage the participants. When you see this graphic - pause and ask the question(s) in the box.

Activities



The Activities are how the caregivers will learn the skills associated with improved well-being. These purple boxes help the facilitator to be aware when the material is part of an activity. The first box contains the

directions for running the exercise for the facilitator. The second box is the material intended to be used with the participants. The third box contains the process question that will follow the exercise. Every exercise will not always have all three boxes.

Time Management

Asks & Activities are an opportunity to engage the participants. Some Asks will require engagement of all participants, other will ask for a volunteer. Activities should promote engagement in all participants. It is essential to the success of this workshop that it is not heavily lecture oriented. The facilitator should be familiar enough with the content and the planned Asks & Activities so time can be managed well. A good goal is to anticipate a third of the time in the workshop to be participative. In a 90 min workshop, facilitators should plan for at least 30 mins spent actively engaging participants in the material through Asks & Activities.

Length of Sessions

The length of the sessions are intended to be 90 mins but can last as long as 120 mins depending on the amount of participant engagement, number of participants, and experience of the facilitator with the content. If the attendance exceeds 6, the sessions will take more time to thoroughly engage all the participants. For facilitators with limited experience running highly structured workshops such as this, more time will be needed to adequately address both didactic and experiential components embedded in this workshop. If the facilitator finds the session is running consistently less that 90 mins the first place is to examine the engagement level of your participants, then make sure that all

the material content is being covered, including the development of a personalize action plan at the end of the session.

Notes for Facilitators

You can look in the content of each session for specific facilitator content regarding that section. Look for **FACILITATORS**: *note* to access these notes.

History of the Caregiver Thrive, Learn, & Connect Workshop

Caregiver TLC workshop was created from the Coping with Caregiving 2.0 Suite (CWC2.0 Suite). CWC2.0 Suite is an update version of the Coping with Caregiving program developed by Dolores Gallagher Thompson PhD, ABPP and her colleagues. The first version of the Coping with Caregiving program is an evidence-based face-to face workshop for caregivers of person living with dementia (PLWD). It is theoretically rooted in two sources: Pearlin's model of primary and secondary stressors as sources of caregiver distress¹ and Beck's cognitive-behavioral model for treating depression². Caregiving is a complex experience and surveys showed that 50-75% of caregivers report symptoms of depression. The original workshop was developed in 1985 and first evaluated in a pilot study in 1988³. Results of the first RCT were published in 2000⁴. Subsequently, Dr. Gallagher-Thompson was

invited to participate in the first set of the REACH studies: Resources to Enhance Alzheimer's Caregivers' Health (REACH I). That 2nd RCT used the CWC program with Caucasian/ White and Latino/Hispanic caregivers, with very positive results for both groups, compared to a minimal support condition⁵.

Following the success of REACH I which ran six unique interventions in six separate sites in the US, REACH II was designed incorporating the best features of

Initial CWC Program (1988)

Length: 12 sessions held on consecutive weeks, led by trained facilitators, 2hr duration each session Intervention Style: Delivered face-to-face in a small group format: 8-12 caregivers of PLWD who met specific criteria for acceptance of

12 caregivers of PLWD who met specific criteria for acceptance of significant symptoms of depression

Topics: Main focus is to teach a set of cognitive –behavioral skills to improve mood. Primary were techniques to identify and add positive activities into the caregiver's daily life, and skills for questioning unhelpful negative thoughts about caregiving and developing more adaptive ways to think about their situation. Caregivers were also taught simple skills to manage problem behaviors of their loved one (e.g., wandering or repetitive questioning).

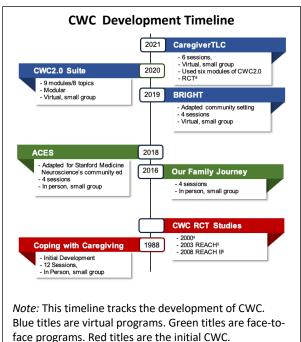
Materials: Participant workbooks were provided. Leaders had their own workbook that included teaching tips and strategies for managing small group interactions effectively.

the successful REACH I programs. The following CWC elements were included in the REACH II multicomponent program: home practice was incorporated and was referred to as an *Action Plan*; skills such as controlled breathing were kept to reduce caregiver anxiety; and material on increasing positive activities and challenging unhelpful negative thinking were retained. New material included a Risk Appraisal at the outset to determine which topics would be most helpful to each caregiver. The Risk Appraisal included an assessment of safety in the home, adequacy of the support network, and encouragement for caregiver to take care of their health. REACH II was a 5-site multi-ethnic, multiracial study of over 600 caregivers of PLWD, done in English and Spanish. Results indicated significant improvement for White/Caucasian and Latino/Hispanic caregivers on an omnibus measure of distress. African American/Black caregivers were less responsive to the program⁶.

The Coping with Caregiving program was developed to meet the psychological needs of depressed family caregivers of PLWD. By offering what was essentially cognitive-behavioral therapy in an educational format, the stigma associated with help-seeking for mental health services was reduced.

Caregivers were willing to say they were "distressed" and come to a workshop that encouraged them

to learn skills to manage depression. It was the first psychoeducational program in the US that was carefully researched and implemented in a variety of settings, with caregivers of diverse ethnic and sociocultural backgrounds. The original CWC was developed when few services existed that were tailored to caregivers' specific needs. Due to a strong need for culturally appropriate services for Hispanic/Latino caregivers in the state of California, CWC went through several iterations to adapt it for cultural relevance. Similar positive effects on depression and caregiving stress were found in RCTs where CWC was compared to other active programs^{4,5,7}. With CWC's success, further adaptations and appropriate modifications in language, format, and examples were developed and studied with other culturally and linguistically diverse groups including Chinese American caregivers, Vietnamese American caregivers, and Farsi-speaking



Persian caregivers. There are a number of programs which have been developed using CWC and the program's core components. A few of the most recent are described in the following text.

Active Caregiving: Empowering Skills (ACES)

ACES is a face-to-face workshop for caregivers of persons with memory loss. In ACES, CWC was modified to include some positive psychology features. Caregivers learn about resilience, stress and stress management, behavioral activation for mood stabilization, tools for changing challenging care recipient behaviors, communication with individual with dementia, family, & providers, and tools for

ACES Program (2018)

Length: Eight-hour workshop: divided into four 2-hr sessions, offered over a 4-wk period Intervention Style: Delivered face-to-face in a small group format Topics: Stress, mood, communication, & challenging behaviors Materials: Participant Packet, & Handouts

happiness while caregiving such as positive thinking, gratitude and forgiveness. This adaptation was based on caregiver feedback as well as advances in the field of caregiving research.

Building Resilience & Inner Strength for Caregivers of Persons with Memory Loss (BRIGHT)

BRIGHT is an interactive, online workshop for caregivers of persons with memory loss. It was developed to enhance existing coping skills, teach new ones, and acknowledge the depth and breadth of each caregiver's inner strengths. Built using the ACES program as a base and adapted for delivery virtually using a teleconferencing technology. In BRIGHT, caregivers create a care map gaining a clearer understanding of their care network. They learn new skills for coping with

BRIGHT Program (2019) Length: Six-hour workshop: divided into four 90-minute sessions, offered over a 4-week period Intervention Style: Delivered remotely via a teleconference platform Topics: Resilience, stress, mood, & communication Materials: Workbook, PPTs, & Handouts

stress, and practice new strategies for communicating with the family, with the person with memory loss, & with medical professionals.

CWC2.0 Suite

CWC2.0 is an evidence-informed module-based program that is delivered virtually. It consists of 9

modules that cover 8 topics. Each topic is designed as an independent workshop. Dependent on the needs, the modules can be combined to form short workshops.

Each module has 1 topic with 3 sub-topics; each session starts with an agenda, skills are taught through an interactive combination of information, exercises, and discussion, topic is summarized at the end of the session; and an individual Action Plan is created to integrate skills into the caregiver's daily life. CWC2.0 Suite Program (2020) Length: Nine modules: 90-minutes each, can be combined into short workshops or used independently Intervention Style: Delivered remotely via a teleconference platform Topics: Resilience, communication, stress, frustration, isolation, mood, self-care, carerecipient challenging behaviors Materials: Facilitator's Guide, PPTs, & Handouts; Companion Website with caregiver materials & resource links sorted by topics

CaregiverTLC

CaregiverTLC is an evidence-based workshop created from CWC2.0. The CaregiverTLC program broaden application of the CWC2.0 from a dementia/memory loss focus to one encompassing physical chronic illness. The caregiver issues are similar – stress, frustration, depressive symptoms, lack of self-care, need for a larger support network, and issues with loneliness/isolation. The psychoeducation and skills from the CWC2.0 program were paired with new examples appropriate for both sets of caregivers – those caring for persons with memory loss and those caring for those with physical chronic illnesses. CaregiverTLC was created during the pandemic and thus followed the CWC2.0 format as a virtual program. It has been evaluated in an RCT⁸ compared to a waiting list control with strong positive results. Caregivers learn about stress and stress management, behavioral activation for mood stabilization, resilience and their support team, self-care, frustration and anger management, how to reduce isolation and stay socially connected while staying primarily at home. The Workshop uses CWC2.0 modules but adds a check in at the beginning of each session to review home practice of the action plan and problem-solve any obstacles encountered.

- ¹Pearlin, L. I., Mullan, J. T., Semple, S. J., & Skaff, M. M. (1990). Caregiving and the stress process: An overview of concepts and their measures. The Gerontologist, 30(5), Article 5. https://doi.org/10.1093/geront/30.5.583.
- ²Beck, A. T., Rush, A. J., Shaw, B. E., & Emery, G. (Eds.). (1979). Cognitive therapy of depression (13. print). Guilford Press.
- ³Lovett, S., & Gallagher, D. (1988). Psychoeducational interventions for family caregivers: Preliminary efficacy data. *Behavior Therapy*, *19*(3), 321-330. https://doi.org/10.1016/S0005-7894(88)80005-4
- ⁴Gallagher-Thompson, D., Lovett, S., Rose, J., McKibbin, C., Coon, D., Futterman, A., & Thompson, L. W. (2000). Impact of psychoeducational interventions on distressed family caregivers. *Journal of Clinical Geropsychology*, *6*, 91-110. https://doi.org/10.1023/A:1009584427018
- ⁵Gallagher-Thompson, D., Coon, D. W., Solano, N., Ambler, C., Rabinowitz, Y., & Thompson, L. W. (2003). Change in indices of distress among Latino and Anglo female caregivers of elderly relatives with dementia: site-specific results from the REACH national collaborative study. *The Gerontologist*, *43*(4), 580-591. https://doi.org/10.1093/geront/43.4.580
- ⁶Belle, S. H. (2006). Enhancing the quality of life of dementia caregivers from different ethnic or racial groups: A randomized controlled trial. *Annals of Internal Medicine*, *145*(10), Article 10. https://doi.org/10.7326/0003-4819-145-10-200611210-00005

- ⁷Gallagher-Thompson, D., Gray, H. L., Dupart, T., Jimenez, D., & Thompson, L. W. (2008). Effectiveness of cognitive/behavioral small group intervention for reduction of depression and stress in Non-Hispanic White and Hispanic/Latino women dementia family caregivers: Outcomes and mediators of change. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, *26*(4), 286. https://doi.org/10.1007/s10942-008-0087-4
- ⁸Montoro-Rodriguez, J., Ramsey, J., Bilbrey, A. C., Kajiyama, B., Thompson, L. W., & Gallagher-Thompson, D. (2023). *Caregiver Thrive, Learn, & Connect: Testing the Efficacy of an Online Psychoeducational Program for Family Caregivers* [Manuscript submitted for publication]. School of Social Work. University of North Carolina-Charlotte.
- ⁸Kajiyama, B., Thompson, L. W., Eto-Iwase, T., Yamashita, M., Di Mario, J., Marian Tzuang, Y., & Gallagher-Thompson, D. (2013). Exploring the effectiveness of an internet-based program for reducing caregiver distress using the iCare Stress Management e-Training Program. *Aging & mental health*, *17*(5), 544-554. https://doi.org/10.1080/13607863.2013.775641.

Strategies for Stress

The following is the facilitator's summary of the module:



Aim of Module

To educate the participant on stress and it's effects. To offer two evidence-based stress reduction skills.

Handouts- CG TLC 1HO Mapping Your Stress Mindful Breathing Visualization Guide

Three Main Points

1. Stress affects our life in many ways, some of them unexpected.

PARTICIPATION

Is voluntary but, Best way to learn

SURROUNDINGS

Check screen visibility, Reduce noise

IF DUTY CALLS Leave to do what you need Come back when you can

- 2. Everyone shows stress in different ways, and it is important to know your own signals.
- 3. Deep breathing & visualization work best if they are practiced often.

Activities

Action Plan

Activity 1: Mapping Stress Activity 2: Deep Breathing Activity 3: Visualization Activity 4: Action Plan

Building Community

TIME

90 minutes long May need to interrupt

PRIVACY

Said in the group,

Choice of 2:

Daily Practice of Deep Breathing Daily Practice of Visualization

Slide 2 Building Community



→ If you prefer questions being submitted through the chat feature now is a good time to mention it

Material

Welcome to the Caregiver TLC workshop! This is a "psychoeducational" workshop. The purpose is to teach skills and tools so that caregiving is less stressful and a more enjoyable experience. We know you will feel supported each week, but our main aim is to teach

you things that research has shown can make a difference in how stressful caregiving is.

Every session we have an agenda and it's quite full because we have a lot to share with you. So, it may be necessary for me to interrupt in order to keep us "on track" to cover all that we need to cover in each session.

We find that caregivers who get involved, speak up, and respond to our questions get the most out of the workshop. Part of this participation continues at home during the week. At the end of each session, we will work on an action plan to help you to take the skills and tools we teach and make them work for you. We know that those who put in the effort get the best results, so we encourage you to think of this as your personal learning experience. At the end of this workshop in 6 weeks, you will have many skills that should be very helpful to you as you continue your caregiving journey.

To make this a safe place for everyone to share, we follow Las Vegas rules – what is said in the group, stays in the group. Please don't share the stories you hear outside of this session.

Please check your screen visibility if you are in a public place. Your mute button looks like a little microphone and is located in your tool bar. If you click on it and a line appears across it then no one can hear you or any noise happening by you. If you want to talk, just click on it again – the bar is no longer across the microphone, and we can hear you if you speak. It is good to be muted until you want to say something.

It is likely that many of you have are sharing your home with the person you are caring for. If you need to leave the screen to provide care, please do so. You do not need to announce you're leaving or that you've returned to the group. Any questions? Let's do introductions.



Slide 3 Introductions

Considerations

- → It is good to write a few notes that identify the CG by name on screen, preferred name, who they are caring for and relation to them, and the diagnosis. If they share it is good to note stage of disease progression.
- → Not all care recipients have a diagnosis, or even if it has been written in a chart, the CG may not have been informed of the diagnosis.
- $\rightarrow\,$ Will need to single out each CG and have them introduce themselves.
- → If someone starts to go on and on this is your chance to tactfully interrupt: *Thanks John for* sharing – I need to be sure everyone has the opportunity to share so let's move on to Mary. You should be keeping time so that no one goes over 2 minutes

Material

Introduce Facilitator(s) - MODEL here that time is precious, be brief in your introduction

- Name, Title, brief statement of how you work with CGs
- If you are working with a co-facilitator, have your co-facilitator introduce themselves
- Introduce any guest that may be observing



Have CGs Introduce Themselves:

We'd like each person to say, in a minute or two, your first name, who you are caring for, what their main problems are, and what you hope to get from this workshop. We'll go around the group, so everyone has a chance. Let's get started!

Slide 4 Today's Topics



Material

Today's Topic is all about stress.

- We'll start with how caregiving can lead to additional stress in your life.
- Then look at your own unique stress reactions.
- Finally, we explore two different relaxation skills you can use.

Slide 5 Stress & Caregiving

Stress & Caregiving

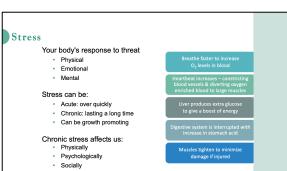
- Caregiving over a long period of time takes a toll on your physical and emotional state
- Caregiving's unique challenges that often increase stress
- Chronic stress impacts health & well-being
- · What stresses out you may not stress out another

Considerations

- → Important note here is that everyone reacts to stress in unique ways
- → Once they 'map' their own stress reaction they will have a clue as to when to use the relaxation skills to the best benefit.

Material

Caring for another person for a long period of time can take a toll on your physical and emotional state. Research has shown that CGs face unique challenges that often increase stress. Whether it is the length of time caregiving, huge range of tasks performed from addressing increasing complex medical needs to daily personal tasks like bathing and toileting to the sometimes awkward and confusing role changes that happen when you need to provide care for the person you always considered as the person who cared for you. When stress is excessive and extended, it can become very damaging. This chronic stress over time, it can impact your health and well-being. Since you're caring for someone at home right now, it is especially important for you to pay attention to your physical and emotional health. While this workshop can't take away all the challenges of caregiving, you can take steps to manage stressful situations in a way that is healthier for you.



Slide 6 Stress

Considerations

→ Knowing you're stressed is very important. This realization helps the CG to take a problem seriously, you must know you have an issue first.

Material

Stress is a primitive biological response to threat. Any perceived threat - physical, emotional, or mental - starts a cascading effect, which happens very quickly,

so let's go step by step.

- Threat is perceived, hormones are released, ultimately releasing the hormones adrenaline and cortisol.
- In response to these hormones, you breathe faster to increase oxygen levels in blood and your heartbeat increases, blood vessels constrict and diverts that oxygen enriched blood to the large muscles.
- As a result, your blood pressure rises, and the liver produces extra glucose to give you a boost of energy.
- Your digestive system is also interrupted, and your muscles tighten to minimize damage in case of injury.
- When the perceived threat is over, a gland in your brain, the hypothalamus, sends a message to return your system to normal.

Acute Stress is over quickly – think of an almost accident. You're on the highway, you see an accident happen in front of you, time seems to slow as your body reacts, you are able to avoid accident, you pull over, and you calm down after a moment or two.

Well Managed Stress can help to make you stronger. When you need to handle a difficult, challenging, or stressful situation, stress signals the body to give you an added boost. Whether the situation is seeking information about a diagnosis or providing a physical boost in times of emergency like during a fall, stress can provide the push to act. Stress can often help you lead to growth as well. Pushing you to do more than perhaps you would have done normally which will in turn increase your sense of competence to handle difficult situations. Most caregivers experience a mix of both the positive and negative effects of stress. Today we are focusing on the negative since that is what tends to cause the problems.

Chronic stress occurs when your system believes it is under constant threat and it never gets the message to stand down and return to normal.

Why is dealing with chronic stress important?

Research has shown us that a person who is chronically stress and is not managing their stress is affected throughout their system in very specific ways.

Slide 7 Consequence of Stress

onsequences of S	stress	
PHYSICAL	PSYCHOLOGICAL	SOCIAL
health related	emotional/mental	relationships
 high blood pressure heart problems increased chance to catch colds and flu 	 depression / anxiety anger / irritation changes in appetite sleep problems lack of energy hopelessness / helplessness 	 withdraw may feel like burden increases loneliness friends and family can drift away

Material

Unmanaged Chronic stress has consequences. It can take away from your quality of life by lowering your ability to experience pleasure or a sense of accomplishment. This can affect your ability to provide the best care you can.

Physically. If stress lasts for a long time, it can lead to many health problems. This can make CGs at risk for

stress-related conditions such as:

- High blood pressure
- Heart problems
- Increased susceptibility to colds and flu
- 12 YOPTIMAL AGING CENTER

Psychologically. When left untreated, chronic stress can affect a cg's emotional and mental state. CGs with untreated chronic stress are at a higher risk for the following conditions:

- Depression and/or Anxiety
- Anger and/or Irritability
- Changes in appetite
- Sleep problems

• Lack of energy

• Hopelessness/Helplessness

Socially. Caregiving often challenges friendships and relationships. As the stress builds up, some CGs:

- Feel like they are a burden
- Refuse assistance when offered
- Isolate themselves which increases loneliness
- Are alone in caring because friends and family have drifted away.

While these consequences may seem inevitable, there are tools you can use to prevent or address many of these issues resulting from chronic stress.

Like the proverbial frog in a pot of water slowly heating that doesn't realize the water has started to boil, chronic stress creeps up on you until stress becomes your new normal. The first step in reducing stress is to know when you are experiencing it.

Your Stress Signs	 Headache Jaw clenching Grinding teeth Trembling of lips, hands Neck ache, back pain
Everyone reacts to stress differently	Tension Dizziness Faintness Ringing, or buzzing Bushing, sweeting
Need to know your signs so you know Think about a recent stressful experienc Scan your body – where are you experie Use the handout to learn what your stres	e Dry mouth ncing that stress? Goose bumps Hearbum is signs are Difficulty breathing Frequent sighing
Over the next week Pay attention to your stress signs	Chest pain Asidness Asidness Asidny, vorry Asidny, vorry Asidny, vorry Asidny, vorry Trouble concentrating Trouble concentrating Broking Broking

Slide 8 Your Stress Signs

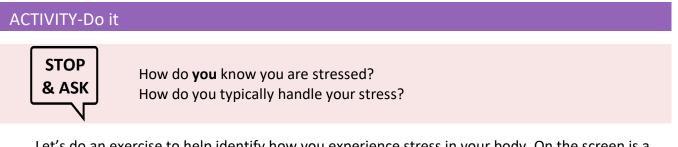
Material

Stress can show up in the body sometimes in unexpected ways. It is important for you to recognize your unique physical signs in your body.

Activity: Mapping Your Stress

ACTIVITY-Directions

Goal: to help participant recognize the physical and mental clues that they are stress. Directions: Ask them questions to help them recognize when they are experiencing stress.



Let's do an exercise to help identify how you experience stress in your body. On the screen is a list of areas in the body commonly affected by stress. You can also find these lists in your packet as a handout.

Do you remember the last time you were stressed? Where do you experience that stress in your body? Is your jaw clenched? Do you feel tension in your shoulders and neck? Does your stomach get upset?

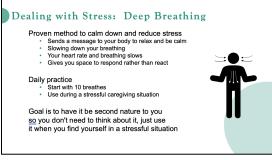
Check off everything that your body does when you are under stressed.

People can also react emotionally to chronic stress. They may find themselves anxious, be easily irritated or angered, or even find themselves acting out of character. Much like the previous activity, review the list and note your reactions. Over the next week, pay attention when you are feeling stressed. See if you can find your own pattern and map the stress.

If you know the first place you experience stress is tension in your shoulders followed by irritability and a headache then you will have a map that will help you, unlike the example of our poor frog, know when to get out of the water. Next, we will teach you two quick and easy skills to help you to manage your stress that you can use at any time.

Slide 9 Deep Breathing

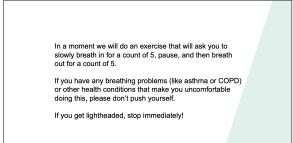
Considerations



- → You may run into disbelief that something so simple as breathing can help something so overwhelming as chronic stress. Encourage them to try it out. You can also tell them that deep breathing interferes with the first step in the body's stress response – you can't breathe slow and fast at the same time, sends a different signal to the brain.
- → We highly recommend you use this practice in your own life. Then you can illustrate its use with a personal example, if needed.

Material

Research has shown us that deep breathing is one of the best ways to lower stress. Regular breathing is 'automatic' but deep breathing gives you an opportunity to control the breath cycle to reduce your stress. By slowing down your breath, you send a message to your body to relax and be calm. Your heart rate and breathing slows, blood pressure and oxygen use decreases, and less stress hormones are released into the body. In a moment, we will try this out in session. But first, to become something that you use in a crisis moment you need to practice it while you are calm until it becomes second nature to you. So, we recommend a daily practice of taking 10 slow deep breaths – it should take no longer than 1 minute. The more you practice when you are calm, the more comfortable you are with the skill. The more comfortable you are with the skill, the more likely you will be to use it when you are stressed.



Slide 10 Caution

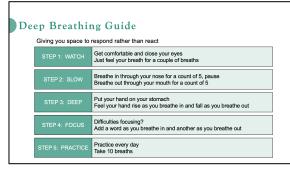
Considerations

- → DO NOT SKIP. If someone knows they have a breathing issue you can encourage them to just observe their breath do not go deep but focus their mind on how it feels. Some can't do that. Encourage them to try to relax each muscle they note is tense until the next activity.
- → We will offer an alternative in a moment for people who cannot do the deep breathing.

Material

- If you have any breathing problems (like asthma) or other health conditions that make you uncomfortable doing this, please don't push yourself.
- We will be offering an alternative in a moment.
- If you find the deep breathing too difficult, please just sit comfortably and observe your breath as we do this exercise with the rest of the group.

Slide 11 Deep Breathing Guide



Considerations

 \rightarrow $\;$ If someone gets lightheaded remind them to stop and breathe normally

 \rightarrow Diaphragmatic breathing (abdomen expanding on inhale) encourages the beneficial trade of incoming oxygen for outgoing carbon dioxide. This type of breathing slows the heartbeat and can lower or stabilize blood pressure.

Material Activity: Deep Breathing

ACTIVITY-Directions

Directions: Explain the 5 steps, Do 10 deep breaths, Ask the Process Questions

EXPLAIN IT: While it seems simple, there are a few steps to deep breathing which we will review with you now. After we review the steps, we will take ten breaths together. In the first step, you will get comfortable and take one or two breaths just to observe where your breathing is in that moment. In the second step, we will deliberately attempt to slow down our breathing to a count of 5 for each inhale and each exhale with a small pause at each beginning and end. The third step is for those of you who are not certain you are breathing deep. We invite you to place a hand on your abdomen – notice when you breathe, does your abdomen rise when you inhale? Then contract or sink when you exhale? That is a good sign that you are using your diaphragm to help your lungs open up to allow for a deep breath. The fourth step is for those having trouble with the counting, you'll notice we offer an option to replace the numbers with a word or phrase. Finally, in the firth step we want to talk about

the importance of creating a daily practice. This practice will be very important if you want to integrate this very valuable tool into your life. It is important to become so comfortable that you don't need to think of the process when you need to use it. Through practice it will become second nature and you'll be able to do it without thinking about the steps.

ACTIVITY-Do it

FACILITATORS: your voice should be slow and measured as you talk them through this activity. The pause is length of one count.

DO IT: Ok so let take 10 breaths together. If you run out of breath before I finish counting that's ok. With practice, you will be able to breath deep enough to make the count of 5. Until then, just consciously slow your breathing. If you become lightheaded while doing this exercise – stop and return to breathing normally.

BEGIN: Sit comfortably in a chair and close your eyes. Your feet should be flat on the floor and arms should be supported in comfortable manner. Try to sit so your shoulders are over your hips. If closing your eyes is difficult for you, you can pick a place on the wall to stare at during this exercise. Notice your breathing, just observe your own breath for a couple of breaths. (*Pause for 2 breaths*) Now we are going to ask you to slow down your breathing to help you relax. To slow down, do a slow inhale through the nose, for a silent count of 5. Then do a slow exhale through the mouth, for the same count.

Breathe In, 2, 3, 4, 5, pause - Breathe Out, 2, 3, 4, 5, pause, (repeat 4 more times)Breathe In, 2, 3, 4, 5,Breathe In,- Breathe Out, 2, 3, 4, 5,- Breathe Out,(repeat 1 more time)- Breathe Out,(repeat 3 more times)

When you're ready open your eyes and come back to the room.

ACTIVITY-Process



What was this experience like for you?

Do you feel less stressed? Note any physical change? Can you think of a specific event when this technique might have been helpful

during a stressful caregiving situation?

It will be important to practice this tool until you become comfortable with its use. The more you practice, the more comfortable you'll become, the more comfortable you are with it, the more likely you are to use it. The goal is for you to feel comfortable enough that when you experience a stressful moment during your caregiving you will naturally take 10 breaths. It's a brief 'time out' from the situation causing you the stress.

Slide 12 Visualization





- $\rightarrow\,$ Although this isn't as portable, rarely is there any push back from it.
- \rightarrow People will want to follow a script to guide them.

Material

Visualization, sometimes called guided imagery, is another way to help you to take a break from stress. It involves the step-by-step method of imagining yourself

in a peaceful and safe place where you feel relaxed, happy, and secure. It can be combined with the deep breathing or a progressive muscle relaxation technique where you start at the top of your head and consciously relax each muscle in your body. The aim is to associate the peaceful calm feeling with the image in your head. Eventually your brain will use the image as a signal that it is time to be calm and relaxed. Like the deep breathing, daily practice is the key for success. Best used in an uninterrupted moment, which may be hard to find. Some CGs have found that doing their visualization exercise just before bed can be helpful.

Activity: Visualization

ACTIVITY-Directions

FACILITATORS: begin with this following prep for the participant. Much like the previous activity, keep you voice slow and measured. It is good to have a clock with a second hand handy as the participant needs the full 30 secs after each new addition to fully populate their imagery.

PREP: Do you have a place that sounds like this? Take a moment and pick one out to work with for this exercise. It could be someplace you've been to, or someplace you image that can bring you peace and calm. Close your eyes for a moment and pick a place to try out the next activity on. We will ask you to imagine the details in this place. The colors around you, the sounds you might hear if you were there, what you might smell, even the sensations you might experience like a warm breeze on your skin – the more detail you can think of the more alive the image will feel and the more you will feel immersed in it, experiencing all the relaxation you can draw from it. One last thing, there are long pauses where the I won't be talking, which will give you time to fill in your image or just experience it. I will let everyone know when the end of the activity is, so just enjoy the place where you are. Everyone ready? **Mute all participants for this exercise.**

Slide 13 Visualization Guide



Imagine a place where you can feel calm, peaceful and safe. It may be a place you've been to before, somewhere you've dreamt about going, or maybe somewhere you've seen a picture of.

Focus on the COLORS in your peaceful safe place. Now notice the SOUNDS that are around you, or perhaps the silence. Think about any SMELLS you notice there. Then focus on any skin SENSATIONS - the earth beneath you, the temperature, movement of air, anything you can touch.

While you are in your peaceful and safe place, you might choose to give it a name, whether one word or a phrase that you can use to bring this image back, anytime you need to.

You can choose to linger there a while, just enjoying the peacefulness and serenity. You can leave whenever you want to, just by opening your eyes and being aware of where you are now.

Material

ACTIVITY-Do it

Considerations

- → Make your voice slow and measured enunciate clearly.
- \rightarrow Pause for 30 seconds after each period/section.
- → Find a watch/stopwatch, measure the pause in seconds. It will seem like forever to you until you get accustomed to the exercise.

Sit comfortably in a chair and close your eyes. Become aware of your breath, the tension in your body. With each breath out, release the tension. [PAUSE 30 secs]

Imagine a place where you can feel calm, peaceful, and safe. It may be a place you've been to before, somewhere you've dreamt about going, or maybe somewhere you've seen a picture of. [PAUSE 30s]

Focus on the COLORS in your peaceful safe place. [PAUSE 30s] Notice the SOUNDS that are around you, or perhaps the silence. [PAUSE 30s] Think about any SMELLS you notice there. [PAUSE 30s] Then focus on any skin SENSATIONS - the earth beneath you, the temperature, movement of air, anything you can touch. [PAUSE 30s]

While you are in your peaceful & safe place, you might choose to give it a name, a word, or a phrase that you can use to bring this image back, anytime you need to. [PAUSE 30s] You can linger there a while, just enjoying the peacefulness and serenity. [PAUSE 30s] You can leave whenever you want to, just by opening your eyes and being aware of where you are now. [PAUSE 30s]. When you're ready, open your eyes and come back to the room.

ACTIVITY-Process



What was this experience like for you? Do you feel less stressed? Note any physical change? When do you think you will practice this? How do you see yourself using it?

Daily practice is very important. With daily practice you are training your brain to connect that feeling of relaxation to the image in your brain so that eventually whenever you think of that image? You brain uses it as a cue that it is time to relax. That takes time and effort on your part – by practicing the same visualization every day you will soon be able to use your image to tell your mind and body to relax.

Slide 14 Take Away

Take Away

- Stress affects our life in many ways, some of them unexpected.
- Everyone shows stress in different ways and it is important to know your own signals.
- Deep breathing & visualization works best if it is practiced often.

Considerations

 \rightarrow This is the end of module summary. If you have time, you can encourage your CGs to offer what they believe the 'take away' was from this session.

Material

FACILITATORS: If there is time do the stop & ask.



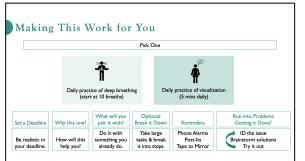
Thinking back over today's session, what are the important points you will take away with you?

FACILITATORS: If not mentioned, make sure these points as included in the Take Aways from today's session.

To summarize, the Take Aways we hope you will take with you today are that:

- Stress affects people's lives in many ways, some of them can be unexpected.
- Everyone shows stress in different ways, and it is important to know your own signals.
- Deep breathing & visualization works best if it is practiced often.

Slide 15 Making This Work for You



Considerations

- \rightarrow The Action Plan is the most important part.
- \rightarrow Encourage them to **pull out their pen and paper**.
- → Remind CGs that to get the most out of this workshop they need to use the skills taught not just hear about them.
- $\rightarrow\,$ Use the boxes along the bottom to assist in the creation of the action plan.

Material Activity: Action Plan

ACTIVITY-Directions

FACILITATOR: Explain what an Action Plan is, and that we will it at the end of each session (The INTRO). Then have the participant pull out a pen and paper and walk them through the creation of their own unique Action Plan (Do It). There are no process questions for this activity. That will be handled during the Check In which starts next week.

INTRO: At the end of each session after our review we will work together to create an Action Plan whose purpose is to help you to figure out how you plan to use the skills and tools we explored today in session. Much like an exercise class, the benefits come from the doing not the watching. If you sit on the couch and watch the exercise program you don't get the same benefit as if you got up and did the exercise along with.

What is in an Action Plan?

- 1. **Set a Deadline:** this is a deadline for when you will start and finish this goal. It is important to be realistic when you think about your deadlines.
- 2. Why choose this one?: knowing why can help to push you when the going gets tough the more important the reason is to you, the better it is. For example if you are doing this because it is part of the workshop versus you've been very irritable lately and snapping at everyone because you are feeling stressed out. You can see that the second is a stronger motivation because it is personal and as such has more push to it than the first.
- 3. What will you pair it with?: research tells us that piggybacking a new task onto something you already do routinely and consistently is a great way to jumpstart something new. It becomes an automatic reminder to do the new task.

OPTIONAL Break it down: Sometimes the skills and tools we teach can be complicated. At that time, you have the option to break it down into many different steps and just deal with each step as it's turn comes up. Breaking it down can also help because plans work better when you know the steps you need to do for the task. We recommend adding a **start date/end date** for each step make you accountable.

- 4. Reminders: what reminders will you use? Reminders can come in many different formats electronic like alerts or alarms on your smart phone or computer, you can have your electronic personal assistant (Alexa, Google or phone ones like Siri or Cortana) remind you or you like more old school methods like post it notes, written daily task lists, or physical reminders like a string tied around your finger. One good example is a mug with the word BREATHE on it to use when you drink your morning coffee reminding you to take a minute and do 10 deep breaths.
- 5. Problem Solving: One of the important parts of any goal making is the problem solving. When you just can't seem to get it done it is important to sit down, figure out what the issue is (is it lack of time? Lack of desire? Problems with the task itself?), brainstorm some solutions, and try out the one most likely to succeed. If it does succeed and you are able to do the task great! If not, then go back to your brainstormed list of solutions and try a new until you find what works.

ACTIVITY-Do it

Everyone should have paper and pen. Let's go through creating your own personal action plan stepby-step. As we go through these, write it down on your paper. A written plan has more weight than one you keep in your mind.

- People do better when they limit the number of changes they are trying to make.
 - Pick between either *Deep Breathing* or *Visualization*

1. Set a deadline – *be realistic*

- When are you going to start your new daily practice? Later today? Tomorrow?
- Example: I will start practice tonight.
- 2. Why this one?
 - I am so stressed my stomach is upset all the time.
- 3. What will you pair it with?
 - It is best to do it with something you already do
 - Example: I will do it right before bed.
 - Optional Break it down
 - Is this new task complicated enough? Maybe not deep breathing but if you plan to do the visualization do you need to record the script? Find one you like on You Tube?
 - Example:
 - I plan to look through the CG-TLC and listen to the visualizations after this session.
 - I'll copy the URL to my smart phone, so it is all ready for tonight and I'll make sure my phone charger is nearby so I don't run out of battery.
- 4. Reminders *computer, phone, calendar*
 - How will you remind yourself to do your new daily practice?
 - I'll set a phone alarm for 10:30 (right after the news so I'll remember)
- 5. Problem-solving
 - Do you anticipate any barriers? Anything you can do ahead of time to avoid them?
 - If I don't like the one I chose? I'll make note of others that might work as I go through them.
 - When will you plan to check with yourself to make sure you are on track?
 - I make a not eon my calendar for to check in on Friday (halfway through the week)

Dealing with the Blues

The following is the facilitator's summary of the module:



Aim of Module

To introduce CGs to a behavioral activation tool to manage mood.

Handouts - CG TLC 2HO OAC Positive Activities Log (PAL)

Four Main Points

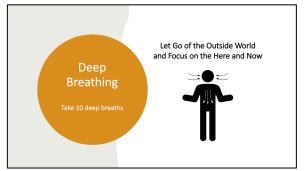
- 1. Depressive symptoms are common during caregiving. Taking the time to enjoy yourself will help you feel less stressed and a better CG.
- 2. Scheduling and then doing positive activities can help to manage mood.
- 3. It is important to do the scheduled activity, even if you don't feel like it. Make a plan and do the plan trust in the process.
- 4. Taking the time to enjoy yourself will help you feel less stressed and a better CG.

Activities

Action Plan

Activity 1: Making a List Activity 2: Positive Activity Log Activity 3: Action Plan Choice of 1: Positive Activities

Slide 2 Deep Breathing Practice



Let's take a moment to let go of all the worries and concerns that may be weighing on you right now. Together, let's take 10 deep breaths as we prepare to focus on the new material we'll be presenting today

Sit comfortably in a chair and close your eyes. Your feet should be flat on the floor and arms should be supported in comfortable manner. Try to sit so your shoulders are over your hips. If closing your eyes is

difficult for you, you can pick a place on the wall to stare at during this exercise.

Notice your breathing, just observe your own breath for a couple of breaths. (Pause for 2 breaths)

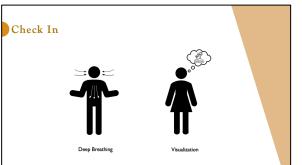
Now we are going to ask you to slow down your breathing to help you relax. To slow down, do a slow inhale through the nose, for a silent count of 5. Then do a slow exhale through the mouth, for the same count.

22 WOPTIMAL AGING CENTER

Breathe In, 2, 3, 4, 5, pause - Breathe Out, 2, 3, 4, 5, pause, (repeat 4 more times)Breathe In, 2, 3, 4, 5,- Breathe Out, 2, 3, 4, 5,Breathe In,- Breathe Out,Comparison- Breathe Out,Comparison</td

When you're ready open your eyes and come back to the room.

Now that everyone is ready, let's check in and see how your Action Plans went last week.



Slide 3 Check In

Considerations

- → Not everyone will follow thru on the action plan, but it is still important to check in.
- → This is a good time to ask what happen and explore possible barriers.
- → Problem-solve barriers and illustrate with a volunteer how they can adapt their action plan.

Material



Has anyone started last week's action plan they created at the end of the workshop last week?

Deep Breathing or Visualization

- ✓ Did you work on your deep breathing or visualization during the week?
- ✓ If not, what prevented you from doing it?
- ✓ Are there ways to work around it?
- ✓ If you did, did it change your level of stress?
- ✓ What was this experience like for you?
- Can you think of when this skill might have been helpful during a stressful caregiving situation?

If no one volunteers, have a suggestion on what to go if someone forgets to do the actions plan – reminders, using both tech (smart phone, alarms) and non-tech (post it note on a mirror, situation of materials, etc.).

FACILITATORS: Normalize forgetting – help the participants to realize that forgetting the new action plan happens to many caregivers however, they will not benefit from learning the skill unless they become comfortable enough to use the skills and that takes practice.

Everyone forgets, especially when they are trying to add something new to a busy schedule. The important thing is not to beat yourself up over it but figure out a plan to remember.

A reminder for those who forget:

23

What will you pair it with? Every time you open the frig – take 10 deep breaths <- think outside of the box. It doesn't have to be an alarm.

Slide 4 Today's Topics



Considerations

 \rightarrow This slide should be a quick introduction of what this session will cover.

Material

Today's topic is on managing your mood. •

ve symptoms of depression

- We'll start with how caregiving can influence mood ٠
- Then we'll introduce a tool you can use to help lift your spirits when you are feeling down •
- Then follow up with how to practice this tool over the upcoming weeks to get the most • benefits from it.

Slide 5 Caregiving & Your Mood



- \rightarrow Having depressive symptoms versus being depressed are very different. If a CG is clinically depressed cg will need more than this program to address the need. A referral to professional help is needed.
- \rightarrow If a CG mentions they are thinking of harming themself or another – follow emergency protocol.

Material



Caregiving and Your Mood

Caregiving can lead to depressive symptoms

Unexpectedly becoming a caregive The intensity of the caregiving Severity of the disease

It is more common than most realize • 40 to 70% of caregivers have symptoms of d

Caregiving may make you feel like you have little to no control over your life

> Sometimes as a caregiver you may experience some uncomfortable moods. Has this happened to you? Do you end up feeling down, or anxious? Frustrated sometimes?

FACILITATORS: Remember to normalize this experience.

These feelings are a normal part of caregiving, and many caregivers find good ways to cope. But sometimes you may need a little something extra to boost your spirits, so today we will be focusing on those times when you are feeling down and offering a tool that has proven to be helpful to other caregivers.

There are many reasons why caregiving may lead to experiencing depressive symptoms and other uncomfortable moods.

- Unexpectedly becoming a CG. For many CGs, providing care was not what they expected. Whether it is a retirement derailed or trying to care for a parent while caring for children, the added responsibility and destruction of long-awaited plans can take a toll.
- Caregiving for someone can become all consuming. Caring for another can mean long hours, high levels of stress, less sleep, and more family conflict. All of this can add up leading to feelings of being overwhelmed.
- Severity of the person's illness. The more severe the disorder, the more CGs reported depressive symptoms and other negative emotions.

In caregiving, experiencing depressive symptoms is more common than you may realize. Research shows that between 40 to 70% of CGs have some symptoms of depression. Many people who have these symptoms either fail to recognize them or are too embarrassed to seek help.





Depressive symptoms = some negative feelings Depression = 5 or more of these symptoms every day for most of the day for over 2 When it starts to effect your functioning it is time to s

Considerations

- \rightarrow There are a variety of hotlines that are available for folks to use. The national suicide hotline is 1-800-273-8255. It is available 24/7, including holidays. Translators are available for any language.
- \rightarrow I always recommend that the facilitator calls the hotline before doing this module, so they can speak from a place of knowledge when they

decide whether a recommendation during the module is warranted.

Material

When is it a problem?

- So, what are these depressive symptoms?
 - You may feel sad, empty, irritable, or hopeless
 - You may find yourself having a loss of interest or just gaining no pleasure in activities you used to enjoy
 - Your appetite can change you may find yourself eating more or eating less
 - Your sleep may change too much or not enough
 - You may feel restlessness or the opposite feeling slowed down
 - You may experience a loss of energy
 - Feelings of worthlessness
 - Slowed thinking or finding it very hard to concentrate
 - Or you have thoughts of harming yourself



You may want to take a moment and look at the list on the screen. Do you recognize many of these? You don't have to share with the group, but it is important to keep in mind as we continue our discussion.

There is a difference between have some symptoms and have a depressive disorder. Everyone has negative feelings that come and go, but when you experience 5 or more of these symptoms every day for most of the day for over two weeks it is important to seek treatment from your primary care physician or a mental health professional.

Depression can be treated very effectively with either medication, psychotherapy, or a combination of these. If you are feeling depressed, please reach out for help.

There's nothing wrong with you for seeking help – in fact, it's likely to make you a better CG in the long run. Untreated depression rarely gets better on its own, so getting help will be good for both you and the person you are caring for.

Slide 7 Taking Back Control with Positive Activities

Taking Back Control with Positive Activities

One way of dealing with the blues is to make time for positive activities idence-bas Non-pharmaceutical treatment for depressive symptoms

If all you do is related to caregiving, you may experience

- Burnout Frustration Resentment
- All which can lead to depressive symptoms

It is the lack of balance between challenging and positive activities in your life that can make you feel like you have no control - it's time to add more positive activities!

Considerations

- \rightarrow We tend to see CGs when things are going bad therefore we talk about the bad a lot as we normalize these experiences and help the CG to find solutions.
- \rightarrow There are good things about caregiving. CGs report a sense of accomplishment. They learn / practice new skills which can help to keep their brain active and strong. They report that giving back to the

person they are caring for can provide a sense of purpose to their lives. They report an increase in confidence in the ability to handle problems, sometime referred to as self-efficacy. So, it's not all bad!

Material

- Decades of research show that one effective way to manage your mood is to take control of your life. Many times, caregiving is not an activity we ever planned to take on; we come to it by necessity. At times, it can make our lives feel a bit out of control, or at least it may feel like you have little to no control. One very effective way of dealing with this is to make time in your schedule for positive activities.
- Although being a CG is time consuming, it is important that you make time to do activities that • add something positive to your day. If all your activities are limited to your caregiving responsibilities, you may begin to feel burned out, frustrated, and even resentful. This can lead to depressive symptoms.
 - You may say to yourself "What's the use?" or, "It seems like there's nothing I can do to make things better."
- When you notice that you are starting to have these types of feeling it's time to add positive • activities into your day.

Slide 8 What are Positive Activities?

 They can be big or : Require some plann Be done alone or w 	ing as they must be scheduled	e, meaning, or purpose
Examples: • Reading • Going for a walk • Listening to music Helping a neighbor • Doing a kind act • Meeting a friend • Being creative • Taking a hike	Gardening Watching children play Shooping Planning a trip Trying out a new recipe Watching a sunset Baking Listening to the bird sing	Doing a puzzle Visiting a museum Volunteering Being needed Playing a game Yoga Smiling at a neighbor Being creative

Considerations

- → You might get some push back that something so 'simple' can make a difference. It does and your confidence in presentation will go a long way in convincing the CGs to give it a try.
- → One of the most common depressive symptoms apathy or lack of interest in doing things – is an issue with this intervention. If it comes up, acknowledge it. "I have no energy" or "I can't think

of anything to do" are both identifiers to this. For these people – **just do it** becomes a good mantra. Plan it, schedule it, do it – whether you feel like it or not until you start to feel better.

→ Keep the activities simple and problem-solve if issues arise. If it is a walk around the block – walk them through what they need to do. Sneakers by the door – makes them easier to find but also, it's a reminder to go and walk. Walking with a buddy can help. So can setting an alarm.

Material

Positive Activities are activities which give you a sense of pleasure, meaning, or purpose. They can be big or small

- Example Going to see a play with friends or having a cup of coffee in the morning to start your day Scheduling is important so there is some planning involved.
- If the object here is to 'take back some control of your day' you can't just pick stuff out of the day that happened. To count you must schedule it, then do it.

Positive Activities can be done alone or with others

- Positive activities don't require others to be successful, although having others along can enhance some activities. However, including others can also complicate things. Will your friend show up? Are they as excited about doing this as you are? Does having them along mean you are more likely to do the activity? As you can see there are pros and cons to having others involved.
 Can be brief lasting only a few moments or take all day
- The power is in the scheduling and doing the length of the event is not as important as whether you actually do it
- To start, we are going to encourage you to make the activities small and easy to do. The larger the plan, the more places the plan can fail. So, in the beginning keep it simple and easy. As you gain experience and your mood is better, adding more complicated plans can help to keep better mood as you anticipate the activity.
- Some examples of Positive Activities might be reading, going for a walk, listening to music, or helping out at your place of worship. More examples that caregivers report helpful are on the screen.

Slide 9 Making the List

Considerations



Material **Activity: Making a List**

ACTIVITY-Directions

PRITINE ACTIVITIES STUFF I LIKE TO DO FI USED TO DO

- \rightarrow You will walk them through this step by step. Make sure they have pen & paper available before you begin.
- \rightarrow You can use return to slide 31 in between to spark their memory

Activity

Requires pen & paper

FACILITATORS: Encourage the participants to pull out a pen and a piece a paper to write on as you will be walking them through the process of brainstorming a master list of 15-20 activities that they think will provide a sense of pleasure, meaning or purpose. Encourage them to not use their caregiving tasks for this exercise, even though they might fit the criteria. After you give them the instructions for the step they are on, flip back to S31 so they can use the list to spark thoughts on what might work for them. They give them at least 2 – 5 mins to think of 5 to 7 positive activities for each step. Note: the exercise step will follow on the next slide (S33).

ACTIVITY-Do it

We are going to make our master list of Positive Activities now. This is the list you will draw your Positive Activities from later when it is time to schedule them. Please make sure you have a paper and pen handy. (wait a moment for the CGs to return) Ok let's get started.

Step 1 Write down your current Positive Activities

What are you doing right now that you enjoy? What do you find meaning or purpose from? **Example** This can be anything from a morning coffee, evening walk, reading, etc.

Try to keep most of your activities simple or small. Things you can do with little planning, or things that won't take a long time to do. Try to think of things that you don't need a lot of preparation for. The easier it is for you to do right now the more likely it is that you will actually do them – especially if you are feeling down.

FACILITATORS: *flip back to S31 and give the CGs 2-5 minutes to write down some current activities.*

Step 2 What did you enjoy in the past?

When you are thinking about this ask yourself: Can you do it now? Why did you stop do it?

Or can it be modified to work now?

Example A CG I worked with used to like to hike and take pictures of the wildlife, but he couldn't be gone all day and taking Dad with was impractical.

Modification He put up a bird feeder and now takes pictures of the local wildlife in his backyard. Bonus - now the backyard is full of birds and his dad likes to watch the birds too.

How to do this

- 1) Identify what made it enjoyable
- 2) Find a way to keep the enjoyable part by: what is stopping you? problem solve and make a plan

FACILITATORS: *flip back to S31 and give the CGs 2-5 minutes to write down some current activities.*



Do you have any past activities that you think might work? How would you modify them?

or Briefly share some of their favorite activities off their list?

Your aim in this exercise is to brainstorm a list of 15-20 activities you can do now

Preferably these positive activities should be simple and easy to do.

If you haven't quite got 15-20 activities on your list, don't worry we have one more category of activities for you to think about.

Slide 10 Importance of Staying Active



Considerations

- → Addition of exercise for someone who is not active needs a clear recommendation that they talk to their doctor before exercising so they can do so safely.
- → There are more complicated ways to measure moderate intensity aerobic exercise using heart rate or activity trackers. You can find those at: https://www.mayoclinic.org/hoalthy.

https://www.mayoclinic.org/healthy-

lifestyle/fitness/in-depth/exercise-intensity/art-20046887

→ National Institute on Aging has a wonderful website for those over the age of 50 interested in adding exercise to the life. www.nia.nih.gov/exrcise-physical-activity

Material

We are going to encourage that you add some way of staying physically active to your positive activity list. Staying physically active has many benefits for a healthy life. It effects your:

- Mental Health
 - Research has shown it can be as effective as antidepressants for treatment of depression and maintenance of a healthy mood
 - People who regularly exercise report an improved sense of well being
 - It has been shown to improve or maintain some aspects of cognitive function, like your ability to shift quickly between tasks or plan an activity
 - o And not unexpectedly, exercise helps to improve sleep

- Physical Health
 - It can manage or prevent arthritis, heart disease, stroke, type 2 diabetes, osteoporosis, and 8 types of cancer, including breast and colon cancer

So, what marathon do you need to run to get these types of benefits?

It's not really that bad. The target for these benefits is 150 minutes (2 ½ hours) a week of moderateintensity aerobic exercise.

- Which is about 30 minutes per day for 5 out of 7 days
- 30 minutes can be broken up it doesn't have to all occur at once
- ANY movement is better than none at all

Moderate-intensity aerobic exercise means any activity that gets your heart pumping. A simple way to tell what moderate intensity means for you is that you can still talk but you can't sing.

New to exercise? The National Institutes on Aging has a wonderful website

do a positive activity. At the end of the day note your mood. Day 1 Day 2 Day 3 Day 4 Day 5 Day 6 Day

Mecol Rating Scale

URL is on screen

PAL: Positive Activities Log

Schedule • Try to schedule at least 4 per day by marking the PAL with a slash for the days you will do them

Do the Task
During the week as you complete your activity you can add the other slash to make an X.

On the Positive Activities Log (PAL) you'll see a numbered list from 1-10, put your top 10 there

Move your list to PAL

Bottom line for your health - schedule in some activities that you enjoy get your blood moving.

Slide 11 Positive Activities Log

Considerations

- → The easiest way to keep track using the form is to schedule with a / and mark complete with a X.
- → If they are using a calendar schedule with a title and check mark next to it or strike through when it is complete should be sufficient.

Material Activity: Scheduling the Positive Activities

ACTIVITY-Directions

FACILITATORS: This is the one time we really encourage people to use the form. But if they don't have it? They can use a calendar or a planner to schedule in the activity. They should either have the form or a calendar handy along with a pen.

FACILITATORS: Before you start, review the form with the participants.

To the left is a place to put the Positive Activities you will be scheduling.

Across the top is a weekly schedule (have them write tomorrow's date or name under Day 1). At the bottom of the grid is two lines. One is for totaling up the number of activities completed that you scheduled and the other is a place to record your mood at the end of the day. The rating scale from 1 (very sad) to 10 (very happy) is at the bottom of the form.

Step 1: Using the Positive Activities List

- Pick 10 things from your Activity List that you are likely to do next week.
 - If you are working with a calendar mark these 10 activities.

FACILITATORS: Give them 3 minutes to select the 10 activities from the list they just made, remind them to keep these first activities simple and easy to do.

Step 2: Scheduling your List of Positive Activities

Now that you have a list of your favorite 10, it is time to put it into action.

- On the PAL you'll see a numbered list from 1-10. Move your list to PAL. Order doesn't matter.
- To schedule, mark the PAL with a slash for the days you will do them over the next week.
 - Repeats are ok coffee every morning, evening walk most nights
 - \circ $\,$ On a calendar you are going to schedule by writing it in.
 - The **goal** is 4 Positive Activities a day.

FACILITATORS: Give them 10 minutes to transfer and schedule the activities.

During the week, it's good to pick a time in the evening or early the next morning where you can sit down and fill in the form.

Step 3: Every night mark which activities you completed

- During the week as you complete your activity you can add the other slash to make an X.
 - On the calendar you can strike it through or check mark it.
- At the end of the day total up the number of activities you completed and enter that on its line near of the bottom of the grid. Then rate your mood for the day, from 1-10 and enter that on its line.

Slide 12 Using this Skill

Using this Skill

- For effective use of this skill
 - Scheduling is an important part of the process don't look back over your day and count things you already did. It must be scheduled.
 - Don't wait to do things until you feel like it or wait until you are motivated just follow the plan and trust the process.
 - Research has shown that the best dose for the positive activities is 4 per day to reduce depressive symptoms and maintain their absence.

It is important to get 4 positive activities scheduled into your day and then do them!

Consideration

→ Four is the number of positive activities that is the goal to work towards. Some of the CGs you work with will be able to integrate four with no problem but for those that are overwhelmed or who are experiencing apathy they may struggle adding one. It is important to meet the CG where they are.

Material

When people are feeling down, they rarely feel like doing anything. When we first started talking about positive activities, we talked about how taking control of your schedule could help to manage your mood.

To do this effectively, you need to have a plan and follow it. Scheduling is an important part of the process - don't look back over your day and count things you already did. It must be scheduled.

Don't wait to do things until you feel like it or wait until you are motivated – just follow the plan and trust the process. If you scheduled a walk on Tuesday, then on Tuesday you walk.

Now if you find that following the plan is difficult?

For example, you just can't get out there and walk.

Then it's time to problem solve why you are having trouble.

Maybe finding an exercise buddy to help encourage you or change the day/time might be easier options for you— the idea is to problem solve around the barrier.

Research has shown that the best dose for the positive activities is 4 per day to reduce depressive symptoms and maintain their absence. The important thing is to get 4 positive activities scheduled into your day and to do them.

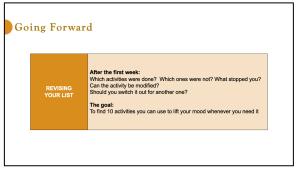
If you are not feeling down right now, this is a good thing to prepare for since most of us have down days every now and then. Know which positive activities work for you can prove very helpful in the future.

If it's difficult to do 4? Are the activities you're choosing require too much effort/planning? – Try to find some smaller ones. Start with a few and grow into 4 a day.



Is this something you are willing to try? Does it sound doable?

Slide 13 Revising Your List



Consideration

→ Encourage participants who are not currently feeling down to think of the future. It is good to do the work now and be prepared with a list of 10 solid pick me up type of activities.

Material

After you have completed a week of scheduled activities it is time to review your list.

Which activities were you able to complete?

Which ones were never done?

Can you figure out what the barrier was that prevented you from doing that activity? Is there a way to modify that activity so it is more likely to be completed?

Take off the activities on the list that you would be less likely to complete next week and add others that you would like to schedule. This list of activities is an ever-evolving list.

Every week you'll review it and either modify or remove the activities you didn't do until you have a solid list of 10 go to activities that work for you. Most people will work on this list for a few weeks.

Slide 14 Figuring Out Your Dose

ing Forwa	°CI You may notice:
FIGURING OUT YOUR DOSE	Connection between how many PA in your day and your mood Some types of activities may work for you more than others On average: 4 positive activities a day keeps the blues away

Material

Consideration

→ Some will see the connection between what activities they are doing and how it effects their mood. Some will not. If someone is very interested and still struggling, encourage them to reach out to a mental health professional proficient in behavioral activation.

Over time you may notice that there is a connection between the number of positive activities you schedule then complete, and your mood score. There will be times when your mood may respond more to a certain type of activity rather than the sheer number of activities.

It is important to note those activities when they happen since they may provide an extra boost when you need it most.

• An example may be when a friend visits after you've been alone for a long time. Your mood may respond more positively.

This type of activity may end up being so important it becomes largely responsible for increasing your mood despite other things happening or not happening in the day.

Summary of Steps for Adding Positive Activities to Your Life

STEP 1: Identify specific activities or situations associated with positive mood which can be added into your day.

STEP 2: Schedule, do, and track these positive activities every day and notice if there really is an association between mood and activities.

STEP 3: Revise or modify this "list" based on your changing needs and observations about what works and what doesn't work.

Slide 15 Take Away

Considerations

→ This is the end of module summary. If you have time, you can encourage your CGs to offer what they believe the 'take away' was from this session.

Material FACILITATORS: *If there is time do the stop & ask.*

Depressive symptoms are common during caregiving. Taking the time to enjoy yourself will help you feel less stressed and a better caregiver.

Scheduling and then doing positive activities can help to manage

Make a plan and do the plan - trust in the process

It is important to do the scheduled activity, even if you don't feel like it.

STOP & ASK

Take Away

mood.

Thinking back over today's session, what are the important points you will take away with you?

FACILITATORS: If not mentioned, make sure these points as included in the Take Aways from today's session.

To summarize, the Take Aways we hope you will take with you today are that:

- Depressive symptoms are common during caregiving. •
- Scheduling and then doing positive activities can help to manage mood. •
- It is important to do the scheduled activity, even if you don't feel like it. Make a plan and do the plan – trust in the process.
- Taking the time to enjoy yourself will help you feel less stressed and a better CG. •

Slide 16 Making This Work for You



Considerations

- \rightarrow The Action Plan is the most important part.
- \rightarrow Encourage the CGs to **pull out their pen and paper**.
- \rightarrow Use the boxes along the bottom to assist in the creation of the action plan.

Activity: Action Plan

ACTIVITY-Directions

FACILITATOR: Briefly define the steps.

INTRO: At the end of each session after our review we will work together to create an Action Plan whose purpose is to help you to figure out how you plan to use the skills and tools we explored today in session. To get the benefit from these tools, you have to do your part and practice them at home.

The Action Plan has 5 Steps

- 1. Set a Deadline: this is a deadline for when you will start and finish this goal. It is important to be realistic when you think about your deadlines.
- 2. Why choose this one?: The more personal you can make it the more likely it is to push you to complete your goal
- 3. What will you pair it with?: research tells us that piggybacking a new task onto something you already do routinely and consistently is a great way to jumpstart something new. It becomes an automatic reminder to do the new task.

OPTIONAL Break it down: Sometimes the skills and tools we teach can be complicated. At that time, you have the option to break it down into many different steps and just deal with each step as it's turn comes up.

- Reminders: what reminders will you use? Be creative!
- 5. Problem Solving: One of the important parts of any goal making is the problem solving. When you just can't seem to get it done it is important to sit down, figure out what the issue is, brainstorm some solutions, and try out the one most likely to succeed. If it does succeed and

you are able to do the task – great! If not, then go back to your brainstormed list of solutions and try a new until you find what works.

ACTIVITY-Do it

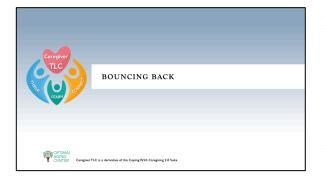
Everyone should have paper and pen. Let's go through creating your own personal action plan stepby-step. As we go through these, write it down on your paper. A written plan has more weight than one you keep in your mind.

- People do better when they limit the number of changes they are trying to make.
 - \circ No choosing on this one everyone does Positive Activities.
- 1. Set a deadline *Be realistic*
 - I will start adding Positive Activities to my schedule tomorrow and continue adding them until I have 10 solid activities I know work for me.
- 2. Why chose this one? *The more personal the better*
 - I've been feeling down and irritable lately I am snapping at everyone.
- 3. What will you pair it with? *Do it with something you already do*
 - \circ $\,$ I will check the schedule every morning with my morning coffee
- Optional: Break it down Take a large task and break it into steps
 - **FACILITATORS:** This will greatly depend on the activities chosen. Offer to walk people through the breakdown process.
- 4. Reminders Computer, phone, calendar
 - o I'll put a Post It note on my bathroom mirror to remind myself why I am doing this
 - I'll set my form right next to my coffee maker, so I see it when I get my coffee.
- 5. Problem-solving *Pending* **FACILITATORS:** You may want to ask if participant anticipate any issues and plan for it.

We will see you all next week. We will do a brief check in with y'all at the beginning of the session to see how you did on your Action Plan during the week and we'll help if you have run into any barriers. Please do let either me or [co-facilitator] know if you will be unable to attend next week.

FACILITATORS: We are looking forward to seeing y'all next week!

The following is the facilitator's summary of the module:



Aim of Module

To increase CG perception of well-being by increasing observance of positives in their lives. To create an illustration of their care team allowing the CG to manage their team more effectively.

Handouts - CG TLC 3HO Three Paths Atlas CareMap Atlas CareMap-Ask Yourself

Three Main Points

- 1. The ability to bounce back from a crisis is something you can work on and make better
- 2. Rewiring your brain to look for the positive can increase your sense of well-being
- 3. Identifying your care team will help you to: appreciate what is working well, plan for future difficulties, manage the people involved, identify missing people and services, and communicate with everyone. **FACILITATORS:** *Plan that the CareMap topic will utilize 2/3 of the session time.*

Activities

Action Plan

Activity 1: Three Paths to Happiness Activity 2: Atlas CareMap Activity 3: Action Plan Choice of 2: Three Paths Refining Your Care Map

Slide 2 Deep Breathing Practice



Let's take a moment to let go of all the worries and concerns that may be weighing on you right now. Together, let's take 10 deep breaths as we prepare to focus on the new material we'll be presenting today

Sit comfortably in a chair and close your eyes. Your feet should be flat on the floor and arms should be supported in comfortable manner. Try to sit so your shoulders are over your hips. If closing your eyes is

difficult for you, you can pick a place on the wall to stare at during this exercise.

Notice your breathing, just observe your own breath for a couple of breaths. (Pause for 2 breaths)

Now we are going to ask you to slow down your breathing to help you relax. To slow down, do a slow inhale through the nose, for a silent count of 5. Then do a slow exhale through the mouth, for the same count.

Breathe In, 2, 3, 4, 5, pause - Breathe Out, 2, 3, 4, 5, pause, (repeat 4 more times)Breathe In, 2, 3, 4, 5,Breathe In,- Breathe Out, 2, 3, 4, 5,- Breathe Out,(repeat 1 more time)- Breathe Out,(repeat 3 more times)

When you're ready open your eyes and come back to the room. Remember to practice this every day and use the deep breathing during a stressful caregiving situation.

Now that everyone is ready, let's check in and see how your Action Plans went last week.



Slide 3 Check In

Considerations

- → Not everyone will follow thru on the action plan, but it is still important to check in.
- $\rightarrow\,$ This is a good time to ask what happen and explore possible barriers.
- → Problem-solve barriers and illustrate with a volunteer how they can still use their action plan.

Material



Has anyone started last week's action plan they created at the end of the workshop last week?

Pleasant Activity Log

- ✓ Did you do the activities you scheduled?
- ✓ If not, what happened?
- ✓ What do you need to do to make sure there are positive activities in your daily schedule?
- ✓ How can you adapt your schedule?
- ✓ What did you notice as you did your positive activities?

[If no one volunteers] Now is the perfect time to fine tune the activities. Rarely does everyone get every activity right the first time. Look over your list and highlight which items haven't you done at all. Is there an easy fix that will help you to do them next week? If not, they may be more aspirational and can be set aside for another time. Replace it with another activity. Remember the goal is to come away with 10 solid activities that you know will raise your mood when you do them. That will take some trial and error.

Slide 4 Today's Topics



Considerations

 \rightarrow This slide should be a guick introduction of what this session will cover.

Material

Today we will be talking about bouncing back or resilience. We will be doing an activity to show you a way to shift how you view the world to a more positive view. Finally, we'll be taking you through a step-by-step

process to help you visualize your support team.

Slide 5 Bouncing Back

Considerations



\rightarrow Stress the practice, as most benefits of this program will be seen through the integration of the skills into the CG's life.

Material

Resilience is the ability to bounce back from life's challenges. Research shows that there are many things that make up resilience. Some of these factors you may

already feel confident in, some you may not.

Factors associated with resilience are:

- The ability to develop and maintain supportive relationships
- Making realistic plans and following them ٠
- The ability to communicate clearly
- Skills in problem solving •
- Your confidence in your ability to use these skills

Your confidence in your ability to use these skills are important. Higher your confidence > more likely to use these skills when a crisis occurs. Confidence is created whenever you are successful in using your new skills.

Slide 6 Creating Balance

Considerations

 \rightarrow Grief is significant for some CGs. If this comes up, acknowledge it as a source of negativity in their life. Noting that the path of grief is rarely straight as it wanders through denial, anger, guilt, sadness and eventually acceptance. For some CGs grief can be a constant companion. Noting that much like the disease itself, they'll have good and bad days.

Creating Balance

- Caregivers have trained themselves to be prepared
- Watching the next crisis Slowly becomes the first and sometimes only thing you see
- Ignore the positive

However the mind can be retrained

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Changing your view of the world
```

ning view to make room for the positive again · Just be happy? How?

Material

Foundation of resilience is seeing the world as place you want to be part of. If your view of the world is only negative, it makes bouncing back from crisis that much harder. As you know, caregiving is not an easy task. On top of the grief most CGs experience, CGs train themselves to be vigilant—always alert to respond to the next crisis. But this constant vigilance comes at a cost. People who train themselves to look for what could go wrong, may find it difficult to see or experience the positive—what is going right, even if it is right in front of them.



Have you noticed this happen to you? Do you find it hard to see the positive in your life?

The brain works significantly better when a person is positive in their general outlook, versus negative, neutral, or stressed. However, just saying be happy doesn't work. People need an active method to change their focus to include the positive, while still remaining aware of and responding to the negatives that are part of caregiving. By broadening your view to include the positive in your life you make room for opportunities to observe the silver linings in your world.



Slide 7 Creating Balance

Considerations

- → Some CGs will already be doing a gratitude journal. Mention that this is similar but different. Encourage them to share if it has helped them.
- \rightarrow Ask them how it has help?
- \rightarrow What have they notice being different?
- \rightarrow After a time was it easier to do?

Material

The following three topics heavily influence a person's sense of well-being and happiness.

Gratitude:

- The act of giving thanks can have a remarkable impact on a person's well-being.
- People who express gratitude on a regular basis report feeling bad less often and feeling better more often.

A Kind Act: Defined as doing something for others

- People who volunteer or do kind acts for others on a consistent basis tend to have better psychological well-being, including fewer depressive symptoms and higher life-satisfaction.
- This seems to be especially true in older individuals.

Positive Experience: Defined as experiencing something nice

• What research tells us is that reflecting on past positive experiences can influence current mood. It can assist in building positive expectations for the future.

So, what is one simple thing you can do to help yourself start noticing the positive in your life again?

Slide 8 Three Paths to Happiness

hree Paths to Happiness	Three Paths to Happiness	- Argel
	entrude	20-
Two minutes a day for 21 days in a row	0 0 0 0 0 0 0	
Write down 3 things: ✓ A Gratitude ○ something you give thanks for	Kind Act	5
 A Kind Act something nice you've done for someone 		-
 A Positive Experience something good that has happened to you 	Postive Siparknos	
Review at the end of each week	The second	

Considerations

→ Not everyone enjoys journaling, but in this instance writing it down is part of the process. The ability to review and reflect on forgotten positive occurrences that happen over the week is part of the process that makes it easier to see the positives the next week. You can always ask people if they remember what they had for lunch a week ago last Tuesday. Many will not be able to – use that to reinforce the

importance of using writing as a tool to increase their memory of these events that they usually overlook.

- → They do not need to write a novel. All that is needed is a word or two that will remind them of the event. Example: writing down 'held door' to remember that someone held the door for them. They should give no more than a few minutes a day to this task
- \rightarrow This should be done **every day for 21 days** to see the change in broadening viewpoint.

Material

Every day write down something you are grateful for, a positive experience you've had that day, and a kind act you've done or received.

Journaling these items serves two purposes:

- It focuses your attention on the positives in your life. In essence, it trains your brain to notice the good things around you.
- It acts as a memory aid. You can go back and see exactly what good you've done or experienced. Tips for Success
- Pick a time you'll need 2 mins of uninterrupted time to do your journaling, ideally the same time every day.
- Create a reminder
 - Writing before breakfast? Set an alarm and do your writing before cooking breakfast.
 - Write before going to sleep? Put your journal and pen next to your bed.
- Find your medium. Whether you use a book or computer program, get one you really like. Enjoying writing will help you stick to the habit.

Activity: Three Paths to Happiness

ACTIVITY-Directions

FACILITATORS: There is a form in their packet or if they can't find their packet, they can use a paper and pen. Give them two minutes to do the task.

ACTIVITY-Do it

Write down one thing you are grateful for, one kind act, and one positive experience. You don't need to write down everything that happened. A word or short phrase is all that is needed to bring the event back.

ACTIVITY-Process



How it was for you? Did you find any one category harder?

FACILITATORS: Reassure folks that many find it difficult the beginning but over time it becomes easier.

Remember to retrain your brain to look for and recognize the positives that are happening in your life you need to do this activity for 2 mins every day for 21 days. Now let's look at another factor important for resilience when things get tough.



Slide 9 Looking at Your Support Team

Considerations

→ There are CGs who will tell you that this won't help them because they do it all themselves. They have no one that helps. This exercise can be very valuable for them since it may help them to realize that there might be support that they are unaware of that they can take advantage of.

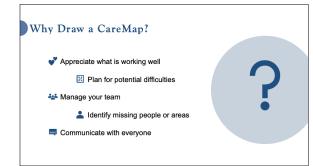
Material

One of the most important factors for resilience, especially for CGs, is the ability to develop and maintain supportive relationships. These relationships can consist of close friends and family, medical professionals, even neighbors and structured groups like this workshop or a CG support group. CGs, especially those that care for people over a long time, are at risk for isolation.

It is important to identify who is part of your care team. To do that we will be using an Atlas CareMap. The Atlas CareMap, developed by Dr. Rajiv Mehta (raa-jeev meh-taa) and his team at the Atlas of Caregiving, is a drawing of a family's care ecosystem.

Simply it shows who is caring for whom, and how.

Slide 10 Why draw a CareMap?



Considerations

- → One way to help a CG feel more in control is to help them get a clear picture of their current situation.
- → For those that are reluctant, remind them that before you can fix something you have to know what parts need fixing first. Drawing out the network can help them to easily see what needs work.



Material

An Atlas CareMap is a diagram of relationships, connections, and interactions. It illustrates the often-invisible threads that bind us to others: both those who we are closest to, and those who we may have only a passing relationship with.

The Atlas CareMap shows relationships of care:

- any sort of relationship you have with another person where you give or receive help, support, or advice.
- They can be with family, friends, coworkers, neighbors, and even pets.

Creating your own Atlas CareMap will help you take notice of these relationships.

This can better help you to

- appreciate what is working well,
- plan for potential difficulties,
- manage the many people involved,
- identify missing people and services,
- communicate with everyone.

Slide 11 Looking at Your Support Team



Considerations

→ Some may look confused or worried at this point. You can reassure them that you will be working with them step by step and they can ask questions during the process.

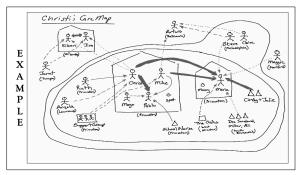
Material

An Atlas CareMap is composed of:

• "Actors" - people, pets, professionals, and places,

shown using different symbols

- "Links" arrows that connect them showing who cares for whom, with different types of lines indicating how frequently the care is provided
- Placement of Actors corresponds to how far away they live.



Slide 12 Example

Considerations

 \rightarrow Some may look confused or worried at this point. You can reassure them that you will be working with them step by step and they can ask questions during the process.

Material

- This is an example of what a CareMap looks like.
 - Note it looks a little messy and that's ok. First drafts usually are very messy as you work to figure out where everyone belongs.
- Christi's Atlas CareMap shows the many caring relations that exist within her family. You'll note that Christi and Mike family are spread out in different parts of the US.
- In NJ, Christi & Mike care for Mike's mother Maria, who has dementia and lives next door. You can see that her pet Manny lives with her.
- Several other relatives and professionals also care for Maria.
 - The Oaks Drs Sandoval, Miller, & Ali Cindy & Julie
- Christi and Mike also care for a son, Pablo, who has diabetes.
 - You can also see the school nurse cares for him as well.
- Mike and his brother, Steve (in Philadelphia) also care for their father Arturo (in Baltimore), while Christi and her sister Janet, support her parents, Eileen and Jim (in Orlando).
- Two nearby friends, (Ruth & Angela) and a local support group provide support to Christi and Mike.
- The people who live nearby are in the middle, while those far away are on the edges.
- Arrows of different sorts show how frequently someone provides support, with the heavier arrows showing frequent care.
- Rarely does a situation stay the same a CareMap shows a situation at a point in time.
 - People often redraw their maps as things change.

CAMEGINING		Atlas CareMap Worksheet
Who cares for you or supports you?		
Your name:	Who else	a is your household?
Whom do you care for?		
в.		b.
If 's' does not live with you, who doe is in their I	household?	If 'b' does not live with you, who else is in their household?
White allows some for 127		Who also cases for "b"?
This work is licensed and	er a Drisiêne Commons Athleo	en Har Commersal 4.0 Hismakenal Lisures

Slide 13 Handout

Considerations

\rightarrow	Starting with this slide please encourage people to
pull o	out a pen and paper (or use the blank CareMap)
and j	follow along to create their own CareMap.

 \rightarrow After you explain what is on the slide give people 2-3 minute to fill in their information.

→ **HANDOUT** Atlas: CareMap

Activity: CareMap

ACTIVITY

FACILITATOR: Over the next 9 slides the CG will be creating a draft of their CareMap.

Material

- This is the worksheet of the two forms.
- It will be helpful to think about who will be on it.
- You don't need to use the form a pen & a few sheets of paper will be fine.
- We are going to step through the worksheet part by part so please get the pen and paper or worksheet now.

Slide 14 Step by Step Creation of CareMap



Considerations

→ Starting with slide 14 please encourage people to pull out a pen and paper (or use the blank CareMap) and follow along to create their own CareMap.
 → After you explain what is on the slide give people 2-3 minute to fill in their information.

Material

- It will be helpful to think about who will be on it.
- You don't need to use the form a pen & a few sheets of paper will be fine.
- So, let's get started.

FACILTATORS: After you explain each step give people 1 minute to fill in their information

Step 1: Identify Key Actors

- For this exercise, it is best if you limit yourself to a few people, beginning with those that come to mind first.
- Later, you'll find it much easier to add more people and details.

Who lives with you?

• Enter their names in the appropriate section. Don't forget your pets!

Whom do you care for, and who else cares for them?

- Enter the names of the people you care for, limit yourself to only one or two
- Enter the names of those who live with them, leave blank if live with you or live alone
- Just below, enter the names of whoever else cares for them, limit yourself to a few people for now.

Who cares for or supports you?

- These could be people who directly care for you, includes those who help in ways that allow you the time to take care of your caregiving responsibilities including providing you with physical or emotional support
- Enter their names.

Slides 15 Blank CareMap



Considerations

 \rightarrow The legend has been increased in size to make it easier to see on the screen. The form is blank in the center.

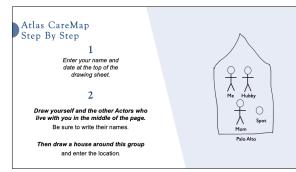
Material

- The legend has been enlarged.
- The actors People (stick person); groups of people
- (3 stick figures); professionals (triangle); pets (circle);

facilities & services (square).

 The links: Frequently (think arrow); daily (thin arrow); weekly (dashed arrow); occasionally (dotted arrow).

Slide 16 Atlas CareMap Step by Step



Considerations

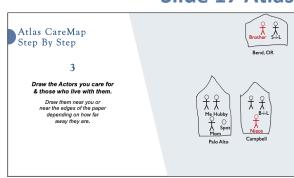
 \rightarrow **Helpful Hint:** Add names & locations of Actors under symbols.

 \rightarrow You can customize the location and names to match your location and CGs

FACILITATORS: After you explain this step give people 2 minutes to fill in their information

Material

- 1. Enter your name and date at the top of the drawing sheet. [Optional]
- 2. Draw yourself and the other Actors who live with you in the middle of the page. Be sure to write their names. Then draw a house around this group and enter the location.



Slide 17 Atlas CareMap Step by Step

Considerations

 \rightarrow On the light blue is an example of what adding the new information looks like.

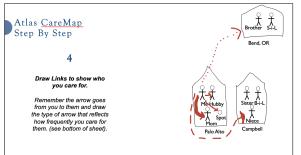
 \rightarrow The new information is in red.

→ **Helpful Hint** Draw yourself in the middle, and then use space on the page to represent **geographical distance**.

Material

1. Draw the Actors you care for, if they are not already on the Atlas CareMap, and those who live with them. Remember to draw them near you or near the edges of the paper depending on how far away they are.

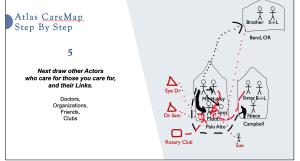
Slide 18 Atlas CareMap Step by Step



Material

1. Draw Links to show who you care for. Remember the arrow goes from you to them and draw the type of arrow that reflects how frequently you care for them. (see bottom of sheet).

Slide 19 Atlas CareMap Step by Step



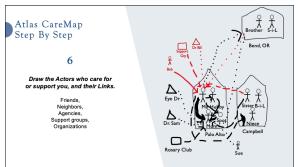
Considerations

→ **Helpful Hint** - If caregiving is mutual (person A cares for person B, and vice versa), draw two separate Links if space permits to make it obvious.

Material

1. Next draw other Actors who care for those you care for, and their Links.

Slide 20 Atlas CareMap Step by Step



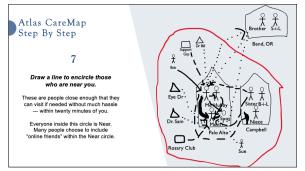
Considerations

 \rightarrow Encourage CGs to think broadly here.

Material

2. Draw the Actors who care for or support you, and their Links.

Slide 21 Atlas CareMap Step by Step



Considerations

 \rightarrow These are folks who you can depend on to respond quickly

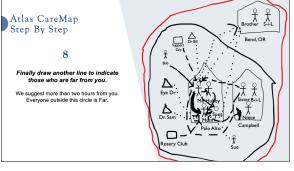
Material

3. Draw a line to encircle those who are "Near" you. These are people close enough that they can visit if needed without much hassle (e.g., within twenty minutes of you). Everyone inside this circle is Near.

Many people choose to include "online friends" (such as Facebook groups) within the Near circle.

Slide 22 Atlas CareMap Step by Step

 \rightarrow



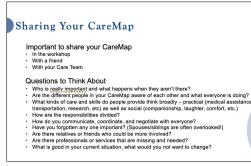
Considerations

Very helpful for long distance CGs.

Materials

4. Finally draw another line to indicate those who are "Far" from you — more than two hours from you. Everyone outside this circle is Far.

Slide 23 Sharing Your CareMap



Considerations

 \rightarrow **Helpful Hint** - Your Atlas CareMap will likely be messy the first time you draw it. Don't worry about it.

- → **HANDOUT** Atlas CareMap-Ask Yourself
- → For More info atlasofcaregiving.com/caremap/

Material

There are two things to remember as you look at the

first draft of your CareMap. **One**, drawing a CareMap is a learning process. You are discovering who is in your network and where they belong. Some people are just where they need to be, and some may need adjusting once you have a complete picture in your mind of who is in your care network. **Two**, this is just a moment in time. Situations rarely stay the same for a long period of time. It is good to periodically review your CareMap to see what has changed. Depending on the amount of change you may need to redraw it to reflect your current situation more accurately.

Step 3: Sharing Your Atlas CareMap

- Explaining what you diagramed can help to clarify in your mind your situation or even help you to remember additional actors you may have forgotten.
- Just the process of drawing your Atlas CareMap may have given you a new perspective on your situation.

However, taking the time to reflect on your map may offer some key insights for future planning.

ACTIVITY-Process



Take a moment and look at your CareMap. What do you see? Is there anything that jumps out at you?

FACILITATORS: Allow the participants to share the insight they have gained during this first look at their care map then proceed to the reflection.

Your CareMap is a tool you can use to figure out the ins and outs of your support network. You can use the following questions to reflect on the information your CareMap may have brought to light.

- Who is indispensable, and what happens when they're not available?
- Are the different people in your Atlas CareMap aware of each other?
- What are the different kinds of care and skills people provide? Think broadly, including practical as well as social.
- How are responsibilities divided amongst the different people?
- How do you communicate, coordinate, and negotiate issues with everyone? _
- Have you forgotten anyone important? —
- Are there relatives or friends who could be more involved?
- Are there professionals or services that are missing and needed?
- What is good in your current situation, what would you not want to change?

FACILITATORS: Depending on the time you have left you may want to pick one or two of the questions and have a discussion with the participants.

Slide 24 Sharing Your CareMap

Sharing Your CareMap CareMap captures a moment in time Important to share your CareMap In the workshop With a friend With your Care Team Questions to Think About • Who is <u>really important</u>, and what happens when they aren't there? • Are the different people in your CareMap aware of each other and what everyone is doing? • What kinds of care and skills opeople provide think broady – practical (medical assistance, transportation, research, etc.) as well as social (companionship, laughter, comfort, etc.) • Have you forgother any one important? (Spouses/skillings are den overlooked!) • Are there relatives or finands who could be more involved? • Are there relatives or finands who could be more involved?

- Are there professionals or services that are missing and needed? What is good in your current situation, what would you not want to change?

- **Considerations**
- For More info: atlasofcaregiving.com/CareMap/ \rightarrow There is rarely time for someone to share their \rightarrow whole CareMap in session, however, you could ask people if they learned anything surprising.

Material

There are two things to remember as you look at the first draft of your CareMap. **One**, drawing a CareMap is a learning process. You are discovering who is in your network and where they belong. Some people are just where they need to be, and some may need adjusting once you have a complete picture in your mind of who is in your care network. **Two**, this is just a moment in time. Situations rarely stay the same for a long period of time. It is good to periodically review your CareMap to see what has changed. Depending on the amount of change you may need to redraw it to reflect your current situation more accurately.

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- How are responsibilities divided amongst the different people?
- How do you communicate, coordinate, and negotiate issues with everyone?
- Have you forgotten anyone important?

The ability to bounce back from a crisis is something you can work on

Rewiring your brain to look for the positive can increase your sense of

- Are there relatives or friends who could be more involved?
- Are there professionals or services that are missing and needed?
- What is good in your current situation, what would you not want to change?

FACILITATORS: depending on the time you have left you may want to pick one or two of the questions and have a discussion with the participants.



Considerations

→ This is the end of module summary. If you have time, you can encourage your CGs to offer what they believe the 'take away' was from this session.

Material

FACILITATORS: If there is time do the stop & ask.



Take Away

and make better

Identifying your care team will help you to: • appreciate what is working well • plan for future difficulties • manage the people involved • identify missing people and services • communicate with evenpore

well-beina

Thinking back over today's session, what are the important points you will take away with you?

FACILITATORS: If not mentioned, make sure these points as included in the Take Aways from today's session.

To summarize, the Take Aways we hope you will take with you today are that:

- Resilience is something you can work on and make better
- Rewiring your brain to look for the positive can increase your sense of well-being
- Identifying your care team will help you to:
 - appreciate what is working well
 - plan for potential difficulties
 - manage the people involved
 - identify missing people and services
 - o communicate with everyone

Slide 26 Making This Work for You

Considerations



- → The Action Plan is perhaps the most important part of this session.
- → Encourage the CGs to pull out their pen and paper and create an action plan right there.
- → Use the boxes along the bottom to assist in the creation of the action plan.

Material Activity: Action Plan

ACTIVITY-Directions

FACILITATORS: Briefly define the steps.

INTRO: At the end of each session after our review we will work together to create an Action Plan whose purpose is to help you to figure out how you plan to use the skills and tools we explored today in session. To get the benefit from these tools, you have to do your part and practice them at home.

The Action Plan has 5 Steps

- **1. Set a Deadline:** this is a deadline for when you will start and finish this goal. It is important to be realistic when you think about your deadlines.
- 2. Why choose this one?: The more personal you can make it the more likely it is to push you to complete your goal
- **3.** What will you pair it with?: research tells us that piggybacking a new task onto something you already do routinely and consistently is a great way to jumpstart something new. It becomes an automatic reminder to do the new task.

OPTIONAL Break it down: Sometimes the skills and tools we teach can be complicated. At that time, you have the option to break it down into many different steps and just deal with each step as it's turn comes up.

- 4. Reminders: what reminders will you use? Be creative!
- 5. Problem Solving: One of the important parts of any goal making is the problem solving. When you just can't seem to get it done it is important to sit down, figure out what the issue is, brainstorm some solutions, and try out the one most likely to succeed. If it does succeed and you are able to do the task great! If not, then go back to your brainstormed list of solutions and try a new until you find what works.

ACTIVITY-Do it

Everyone should have paper and pen. Let's go through creating your own personal action plan stepby-step. As we go through these, write it down on your paper. A written plan has more weight than one you keep in your mind.

- People do better when they limit the number of changes they are trying to make.
 - Have the CGs choose either *Three Paths to Happiness* or *Refining the Atlas CareMap*.
- 1. Set a deadline Be realistic
 - I will start the Three Paths tomorrow and for the next 21 days I will journal a gratitude, kind act, positive experience.
- 2. Why chose this one? The more personal the better
 - I need more positive in my life, my sister said I was a drag to talk to because all I talk about is the bad things that are happening.
- 3. What will you pair it with? Do it with something you already do
 - \circ $\;$ I will do it before I read every night before bed
- Optional: Break it down Take a large task and break it into steps
 - o I will find the notebook & pen right after the workshop today
 - $\circ~$ I will place it on my nightstand, on top of my book
 - o I will start tonight before bed
 - I will journal for 21 days
- 4. Reminders Computer, phone, calendar
 - \circ $\;$ I will set an alarm on the phone to remind me at 9pm every night
- 5. Problem-solving *Pending* **FACILITATORS:** You may want to ask if participant anticipate any issues and plan for it.

We will see you all next week. We will do a brief check in with y'all at the beginning of the session to see how you did on your Action Plan during the week and we'll help if you have run into any barriers. Please do let either me or [co-facilitator] know if you will be unable to attend next week.

FACILITATORS: *feel free to make this more personal!* We are looking forward to seeing y'all next week!

Filling the Well

The following is the facilitator's summary of the module:



Aim of Module

To address the issue of self-care and provide CGs with insight into their own level of self-care

Handouts - CG TLC 4HO NIH A Good Night's Sleep Self-Care Checklist

Four Main Points

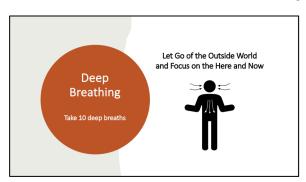
- 1. CGs are at an increased risk for certain health concerns and burnout.
- 2. Self-Care is a deliberate action you take that improves your physical, mental, or emotional wellbeing.
- 3. Understanding what keeps you from doing self-care can help you to increase the amount of self-care you do.
- 4. Prioritizing addressing health concerns, finding support, practicing self-compassion, and adding laughter is a good start on adding self-care to my day.

Activities

Activity 1: Self-Care Check List Activity 2: What Stops You? Activity 3: Action Plan Activity 4: Website Exploration

Action Plan

Choice of 2: Identify Areas of Self-Care Practice Top 3



Slide 2 Deep Breathing Practice

Let's take a moment to let go of all the worries and concerns that may be weighing on you right now. Together, let's take 10 deep breaths as we prepare to focus on the new material we'll be presenting today

Sit comfortably in a chair and close your eyes. Your feet should be flat on the floor and arms should be supported in comfortable manner. Try to sit so your shoulders are over your hips. If closing your eyes is

difficult for you, you can pick a place on the wall to stare at during this exercise.

Notice your breathing, just observe your own breath for a couple of breaths. (Pause for 2 breaths)

Now we are going to ask you to slow down your breathing to help you relax. To slow down, do a slow inhale through the nose, for a silent count of 5. Then do a slow exhale through the mouth, for the same count.

Breathe In, 2, 3, 4, 5, pause - Breathe Out, 2, 3, 4, 5, pause, (repeat 4 more times)Breathe In, 2, 3, 4, 5,- Breathe Out, 2, 3, 4, 5,Breathe In,- Breathe Out,Comparison of the Context of

When you're ready open your eyes and come back to the room. Now that everyone is ready, let's check in and see how your Action Plans went last week.



Slide 3 Check In

Considerations

- → Not everyone will follow thru on the action plan, but it is still important to check in.
- → This is a good time to ask what happen and explore possible barriers.
- → Problem-solve barriers and illustrating with a volunteer how they can still use their action plan.

Material



Has anyone started last week's action plan they created at the end of the workshop last week?

Three Paths

- ✓ Is anyone journaling?
- ✓ Is it getting easier to find things to note in each category?
- ✓ Has anyone reviewed what they've written at the end of the week?
- ✓ What did you notice?

Atlas CareMap

- ✓ Did you complete your Atlas CareMap?
- ✓ Did you do the reflection what did you notice or learn from it?
- ✓ What is your next step?

Bring a copy to all sessions so you can revise it as new thoughts occur.

Slide 4 Today's Topics



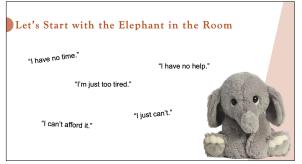
Considerations

 $\rightarrow\,$ This slide should be a quick introduction of what this session will cover.

Material

Today's topic is self-care. We'll start by exploring burnout, and why this can be an issue. Then we'll talk about self-care with a focus on different tips and strategies you can use to help you get some self-care into your life.

Slide 5 Elephant in the Room



Considerations

→ Almost without fail when the topic of self-care comes up there is at least one CG who will say one of these phrases. And it's all true – time, money, energy - they are all at a premium. By stating this upfront, we are letting CGs know that no matter how important this is we realize what we are asking them to do is very hard and even if it may

provide relief, it can seem huge trying to add themselves onto the long to-do list. Our job it to make sure they know that by doing so it makes the rest easier to do.

Material

We know these are real concerns – the job of caring for another person day in and day out can be overwhelming. It can seem impossible to fit one more thing into your schedule. But it's important to find small, doable ways to keep yourself healthy. Ask yourself, what will happen to the person you are caring for, if you burnout from all the stress of caregiving? You are here today because either you noted you needed help, or someone you know recommended that you attend. Try to keep an open mind to the suggestions offered here and focus on the small doable things you can do. Sometimes it doesn't matter how much you do but just that you are doing something for you.



Slide 6 Caregiving & Well-being

Considerations

→ Not every CG will find themselves with every issue. And if you get a very vocal CG who is very early in the disease progression or someone who is very negative and appears on the edge of burnout, they may shut down everyone else. Redirecting the conversation by calling on someone else to contribute by name can be helpful.

Material

Caregiving is a balancing act between the ups and downs. On one side you have the positives. Caregiving is an opportunity for you to give back to a someone who cares for you, a spouse, a parent, or a dear friend whom you love. Many find it very rewarding. But on the other side the need for continuous care with, at times, inadequate resources can be a source of constant worry and stress. Because of these stressors and other like them CG are at an increased risk for burnout.



Heavy Workload

- Conflicting Demands
- Lack of Privacy
- Change of Roles
- Unreasonable Demands
 Unrealistic Expectations

Uncharacteristic Inritability & Impatience Poor Sleop Forgettuiness Physical Symptoms: headaches gastrointestinal distress Decreased appetite Increase food intake Drinking alcohol too much Increase drug usage Isolating Lack of Interest in doing things you use to enjoy Getting sick all the time Feeling anxious or depressed all the time Feeling anxious or depressed all the time

Slide 7 Caregiving is Intense

Material

Around 1 in 4 caregivers experience burnout. Why does this happen?

Heavy workload

 Most chronic illnesses are progressive meaning they get worse over time, increasing in intensity as the disease progresses.

Conflicting demands

• There are not enough hours in the day to get everything done for everybody. Balancing the needs of the person you are caring for, coworkers and employers, family members, and your own needs.

Lack of privacy

• On demand 24/7 means there is little time to be alone.

Change of roles

• CGs move from child or spouse to CG, changing how to relate to the person, and grieving for the lost relationship.

Unreasonable demands

 \circ $\,$ Can be placed upon a CG by other family members or the person being cared for.

Unrealistic expectations

 About the effect caregiving efforts will have on loved ones with progressive diseases such as Parkinson's or Alzheimer's



In a moment we will examine the signs of caregiver burnout. As we review these signs you may recognize a few happening in your own lives. You are not required to share your past or current experiences with burnout. We realize this may be difficult. However, if you are comfortable and wish to share your experiences please do so.

FACILITATORS: It is important to normalize these experiences. Almost all caregivers experience some of these symptoms during their caregiving journey.

Signs of CG burnout

- Uncharacteristic Irritability & Impatience
- Forgetfulness

- Poor Sleep
- Headaches / gastrointestinal distress
- Decreased appetite or Increase food intake
- Drinking alcohol too much & Increase drug usage this includes OTC or prescription drugs

- Isolating
- Getting sick all the time

- No interest in doing things you use to enjoy
- Feeling anxious or depressed all the time
- Thoughts of hurting yourself or the person you are caring for

But CG burnout is not inevitable. The proper use of self-care and respite can go a long way to addressing these symptoms.

Self-Care A deliberate action Provides a buffer between you and feeling overwhelmed or stressed Gives energy to care for someone else You can't get water from an *empty well*Self-care is not a luxury – it is a necessity!

Slide 8 Self-Care

Material

Self-Care is defined as a deliberate action you take that improves your physical, mental, or emotional wellbeing. This does not mean that you are putting you needs over anyone else's – it simply means you are relaxing and recovering in order to perform at the best of your ability when you are needed.

Self-Care can lessen the effects of things you normally

would find overwhelming or stressing, like the signs of burnout we talked about on the last slide. Certain acts of self-care provide you more energy than they take to do. Exercise is a good example of this. As you know, your energy is not infinite, once it's gone it takes time to refill. Proper nutrition, a good night sleep, exercising your body or mind all provide you with a boost to your energy levels, in essence filling the well with more energy than it takes to do these things.

Much like the airline attendants who encourage you to put your own mask on first, taking care of you first means you'll have the energy to take care of everyone else you are responsible for. Self-care comes in many different forms so let's look at that next.



Slide 9 Four Areas of Self-Care

Considerations

→ By splitting self-care into four areas, we offer a more approachable way of thinking of self-care.

Material

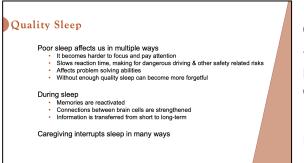
Many CGs find there are several areas of self-care that probably have been neglected to some extent, as you progressed in the caregiving journey – physical, mental, spiritual, and social.

Physical: Care for your body. As a CG you may find yourself neglecting your physical well-being. There is a tendency to push it off, thinking "I will do it later." However, caregiving can take years and neglecting your health over a long stretch of time is not beneficial for you and may in fact impact your ability to provide optimal care. Ask yourself, when was my last physical or dental check-up? How am I sleeping? Am I eating well or depending on take out and fast food? Am I exercising?

Mental: Exercising your mind. Your brain is a muscle that needs to be exercised like any other muscle. If you are feeling fuzzy, finding it hard to think and you have addressed the physical (sleep, eating and exercising), then it's time to stretch your mind. Whether you are learning something new or challenging yourself with a puzzle, your brain develops new pathways allowing it to adapt and change.

Spiritual: Doing what is meaningful for you. Spirituality is a broad concept with room for many perspectives. In general, it includes a sense of connection to something bigger than ourselves and typically involves a search for meaning in life. Spirituality is a personal practice that is meaningful and kindles a sense of sacredness and belonging. Spiritual self-care is any practice that gives you that connection and reduces feelings of isolation and loneliness.

Social: Reach out to others. Social self-care is all about nurturing relationships. Whether is spending quality time with friends, developing new friends, or meeting new people, these people should uplift and support you. Social self-care also means letting go of those individuals who flood your life with self-doubt and negativity when you can. In Facebook, look for the 3 dots at the upper right corner, click on it and select hide post (see fewer post like this), Snooze the author for 30 days, or unfollow them (you'll stop seeing their posts but still stay friends.



Slide 10 Quality Sleep

Considerations

 \rightarrow 76% of CGs reported poor sleep quality, and the proportion is considerably higher for female CGs compared to male CGs.

Material

both ends for a long time. And as a result, our sleep guality has slowly declined over time.

However poor sleep affects us in multiple ways

- It becomes harder to focus and pay attention
- Slows reaction time, making for dangerous driving & other safety related risks
- Affects problem solving abilities
- Without enough quality sleep we can become more forgetful
- Affects mood, leading to irritability, depression, and increase anxiety
- Chronic sleep deprivation increases the risk of high blood pressure, heart disease, obesity, and diabetes

Many people think that sleep is a waste of precious time they could be using to do important things. However, sleep is important and serves a purpose. During sleep

- Memories are reactivated and consolidated, making it easier to recall them
- Connections between brain cells are strengthened
- Information is transferred from short to long-term memory

Caregiving also interrupts sleep in many ways

- Stress, worry, and anxiety can delay falling asleep or may wake you early
- Person you are caring for may wake in the night and need help
- Depressive symptoms can include sleep disturbances



How much sleep do you think you need? How much are you actually getting?

Slide 11 How Much Sleep Do You Need?



Considerations

- \rightarrow This slide directly addresses the myth that we don't need 7-8 hr. sleep a night for optimal results.
- \rightarrow Get through this slide quickly

Material

How much sleep do you need?

- A persistent myth exists that as we age, we need less sleep. This is not true.
- By age 18 the recommended amount of sleep is 7-9 hours.
- This numbers only slightly decrease as we age. For those over the age of 65, the recommended sleep is for 7-8 hours.

Sleep needs are individual, and we've all heard how people can not only survive but thrive on less than 5 hours a night. It is important to note this is **less than 5%** of the general population and that most people are walking around sleep deprived.

So how do you know you are sleep deprived?

You may be experiencing the following symptoms

- Feeling drowsy during the day
- Routinely falling asleep within only 5 minutes of lying down in bed for the night
- Experiencing "microsleeps," which are very brief episodes of sleep while being awake

So how do you increase the amount of sleep you are getting?

Slide 12 Sleep Hygiene

Sleep Hygiene It's just another way of saying good sleep habits Think of it as preparing yourself for for the best sleep you can get Avoid long naps Stick to a schedule Play in the sunlight Get moving

- Restrict what you eat and drink
- Banish electronics Try a warm bath
- , ear warm socks

Why No Naps?

Sleep Drive

Increases during the day · Naps weaken sleep drive and make it harder to fall asleep

No difficult discussions

Considerations

 \rightarrow Sleep hygiene is the first step to addressing sleep problem but if sleep hygiene is insufficient, a recommendation to a physician or a psychologist who specializes in sleep.

Material

Sleep hygiene describes the things we do that can make it easier to get the number of hours of sleep you need as well as improve the quality of that sleep. If you are already getting a solid 8 hours of sleep, you wake up feeling refreshed and rested, then your sleep hygiene is sufficient for your needs. But if you are struggling with getting enough good quality sleep so you wake up the next morning feeling rested than the first step is looking at your sleep hygiene and seeing if any of these items can improve your sleep.

Avoid long naps: Limit napping to 30 min in the early afternoon.

Stick to a schedule: Get up at the same time every day, seven days a week.

Get some sunlight: Expose yourself to sunlight during the day, which helps set your body clock. **Get moving**: Regular physical activity promotes good sleep.

Restrict what you eat and drink: Avoid caffeine after lunch; don't eat/drink for 3 hours before bed. **Banish electronics**: The bedroom is for sleeping or sex, not watching TV, reading, playing games. Try a warm bath, warm socks

- A regular bath may be beneficial two to three hours before bedtime.
- Wearing socks to keep feet warm can also help you fall asleep more easily.

No difficult discussions: Keep it peaceful before bedtime. No arguing or discussing touchy topics.

If you try these for 3-4 weeks and see no improvement, then it is good to reach out to a mental health provider who specializes in sleep to help you.



Slide 13 Why No Naps?

Considerations

 \rightarrow This is important for the care recipient as well as the CG. If they sleep all day, they will be up all night.

Material

Sleep Drive tracks how much you need to sleep over a 24-hour period.

Your sleep drive is lowest in the morning when

you wake up, and gradually increases as the day progresses.

- Napping reduces sleep drive by recharging the energy reserve.
- Longer naps reduce the sleep drive more than shorter ones.

- Napping close to bedtime (even briefly dozing off while watching TV) weakens your sleep drive just when it is most needed.
- Basically, the longer the time that has elapsed since you last slept, the stronger the sleep drive becomes, and the easier it will be to fall asleep.
- In some ways the sleep drive is similar to hunger and napping to snacking. Naps spoil your sleep drive like appetite may be ruined by snacking close to dinner

Slide 14 Benefits of Staying Active

Considerations

→ Exercise is mentioned multiple places throughout the modules as it is beneficial for multiple issues.

Material

One way to take care of yourself – physically, mentally, and emotionally – is to exercise regularly. Even though it may sometimes be hard to find the time, just 30 minutes of physical activity a day can help you maintain

a healthy weight, reduce stress, and improve your overall health and well-being.

Exercising regularly has many positive health benefits, including:

• Stress reduction

•

Improved mood

Benefits of Staying Active

· Heart disease, stroke, and other disease prevention

GOAL: 150 mins moderate intensity aerobic activity

Stress reduction

Improved memory
Reduction in blood pressure

Increased metabolism

Better sleepImproved moodMore energy

- Increased energy levels
 - Heart disease, stroke, and other disease prevention
- Reduction in blood pressure

Increased metabolism

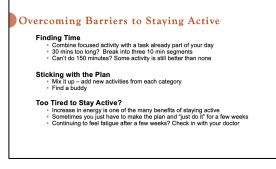
Improved memory

Better weight management

Better sleep

The goal to get these benefits is 150 mins of moderate intensity aerobic activity over the course of a week, so 30 mins daily for 5 of the 7 days will do it!

Slide 15 Overcoming Barriers



Considerations

- → Can't have a conversation about adding something to their schedule without discussing the barriers.
- → These are recommendations, if you have extra time in the module, you can ask the CGs themselves to offer workarounds.

Material

Finding Time

- Combine exercise with a task already part of your day
- 30 mins too long? Break into three 10 min segments
- Can't do 150 minutes? Some activity is still better than none

Sticking with the Plan

- Mix it up add new exercises from each category
- Find a buddy

Too Tired to Exercise

- An increase in energy is one of the many benefits of exercise
- Sometimes you just must make the plan and "just do it" for a few weeks
- Continuing to feel fatigue after a few weeks? Check in with your doctor

Make it a priority

• This is one of the best things you can do for your overall health – physical, psychological, & cognitive health

Make it easy

• Do it first thing in the morning before you get busy, join a gym close by, walk the stairs instead of the escalator etc.

Make it fun!

- Do a Zumba class, do something you enjoy! Laugh
- Mark it on your calendar



What are some of the things that have helped you to stay active in your day-to-day life?

FACILITATORS: Don't forget to mention to check in with their doctor if they haven't exercised in a while. Even if they have a disability, most doctors can offer modifications or work arounds so that they can still get the benefits from staying active.

Slide 16 Self-Care Check List

Self-Care Check List



	st: Building Your Reserve res and check them off when you do
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o	0
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•	P
Nurturing Meaning	Reaching Out
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0	. 6
0	0
o	0

Considerations

 $\rightarrow\,$ The form isn't required, though writing it down is recommended.

Material Activity: Self-Care Check List

ACTIVITY-Directions

There is a form in your packet called the Self-Care Check List. This can be used in two different ways depending on where you feel comfortable. Up on the slide you'll see one way. If you want to add different types of self-care into your day, then making a list and checking off when you've completed the task is a good way to go about it. But if you are not sure, then more exploration may be needed.

This form can also be used to discover what you are currently doing, and which types of self-care you tend to use.

ACTIVITY-Do it

Remember, if you feel like you've got self-care covered and overall, you are not feeling overwhelmed – then just continue with what you are doing. But if you noticed that lately things seem to be weighing more on you and you noted that you are experienced more signs of burnout – then it is time to increase your self-care.

How to increase the amount of self-care you are doing.

Step 1: Let's take a moment and identify what you currently do for self-care. Think about the four different areas – what do you do to take care of your physical body? Exercise your mind? Embrace a connection to the spiritual? Stay connected socially? Go ahead and write those in.

Step 2: What area needs more work? Is there one (or more) area you've neglected in the past year or two? What self-care items would work for you to fill that area?

When you are trying to add a new habit, it is good to write down your intentions and post them where you can see them every day.

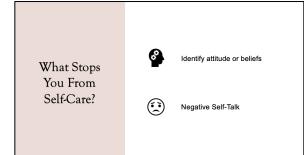
- ✓ Write down what you want to do
- ✓ Then check it off when the task is done

One aspect of self-care we haven't discussed is respite. Respite is a short-term break from caregiving. It can be for a few hours one afternoon, or for several days. Care can be provided from another family member, a friend, or something more structured like an adult care center or a brief stay at a residential facility. The Caregiving TLC website has a respite locator for North Carolina available. (We'll show you how to access it at the end of this session.)

Step 3: We realize that most people can't work on all four areas at once, but we encourage you to select at least one area to focus on and work on in the weeks and months ahead. Writing it down can help you later. If you notice you are starting to experience more and more of the signs of burnout you can pull out your list and add more self-care into your life.

ACTIVITY-Process STOP What self-care are you doing now? What are you thinking of adding to your day-to-day life that will help? Does anyone use respite? Have you found it helpful?

Slide 17 What Stops You from Self-Care



Considerations

→ Adapted from FCA Identifying Personal Barriers https://www.CG.org/taking-care-you-self-care-family-CGs

Material

Activity: What Stops You?

ACTIVITY-Directions

FACILITATORS: Provide the introduction & ask the questions to lead to a discussion.

ACTIVITY-Do it

Many times, attitudes and beliefs we hold can stand in the way of caring for yourself. Whether or not taking care of yourself is a lifelong pattern, or you find that taking care of others an easier option here are two things you can do to help you understand what is stopping you.

IDENTIFY:

The first is identifying what attitudes and beliefs you have about self-care

- Do you think you are being selfish if you put your needs first?
- Do you feel guilty if you take time for yourself?
- Do you feel inadequate if you ask for help?

Lack of time or energy can make getting that time away particularly challenging. You may even feel guilty or selfish for paying attention to your own needs. What you need to know is this: in fact, practicing self-care allows the CG to remain more balanced, focused, and effective, which helps everyone involved.



What beliefs do you hold about self-care? Do you feel guilty if you decide to take some time for yourself? How do you think this would get in the way of you doing self-care?

NEGATIVE SELF-TALK

Negative self-talk is the negative stuff we tell ourselves. Many times, we are meaner to ourselves then we would ever be to someone else. Can you image telling your best friend some of things we routinely tell ourselves? Stuff like "I'm so stupid!" or "You're just lazy." Let's look at what negative self-talk looks like.

Scene 1: Sally has been trying to become more active by adding an evening walk, but it rarely seems to work. She decides to walk after dinner but as she is getting ready, she looks in the mirror. She thinks to herself: "I look horrible – there is no way I'm going out!"



What do you think happened? Did this caregiver go for her walk?

What could she tell herself to influence her decision?

FACILITATORS: There are two ways to attack this statement: 1. Address the "horrible" and 2. Address the "not going out." Both might work – it'll depend on the caregiver. Have the participants try to reframe both side of the negative self-talk before asking them how the new statement might change her behavior (go for the walk rather than staying home).

Scene 2: Anna decided to steal a few moments and enjoy catching up with her friends on Facebook. As she scrolls through her feed, she sees that an ex co-worker has posted. She feels a sense a dread as she sees her name because every time her ex co-worker posts she get so upset at what she writes. Anna finds herself thinking: "If I unfriend her, she'll get mad at me. I'm such a coward."



What do you think happened? Did this end up being self-care or did the experience end up adding to her stress? What could she do to remedy this? What could she tell herself to help her to act?

FACILITATORS: The goal here is to get the participants to recognize that by telling herself she is a "coward" it limits the options she has to deal with the situation. She can hide the post, which will limit her seeing post like this, Snooze the author for 30 days, or unfollow them so she'll stop seeing their posts but still stay friends.

Slide 18 If Lost – Start Here



Considerations

→ We present a lot of information in the module. This is a shortcut for the CG so they can get started right away.

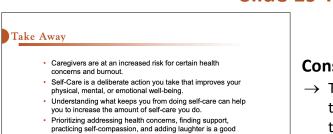
Material

If you find yourself overwhelmed by all the choices presented in this module, then start with these four.

- 1. Address your own health issues. Make a doctor's appointment, get the physical, get a flu shot, update your glasses prescription, whatever you need to do to be healthy. No matter how much juggling it takes to get to these appointments, they are important. Someone depends on you to be healthy. If you are up to date on your medical appointments, then are you eating well? Sleeping well? Pick one thing at a time to change.
- 2. Develop a support network. Whether you use a best friend or a structured support group, find somewhere to safely share your worries and concerns. There are many support groups online

now due to the pandemic. Check your local hospital, one of the Foundations that support the chronic illness of the person you are caring for, or Facebook.

- **3.** Self-compassion is essential. Self-compassion means being kind to yourself by giving yourself credit for the tough work of caregiving, ignoring your harsh inner critic, and allowing yourself time to take care of yourself, even if it's just a few minutes a day. Forgive yourself—often. You cannot be a perfect CG, all day, every day
- **4.** Laugh. Find ways to keep your sense of humor. Watch comedies, share jokes with friends. Research shows that even pretend laughter if done often and long enough turns into real laughter.



Slide 19 Take Away

Considerations

→ This is the end of module summary. If you have time, you can encourage your CGs to offer what they believe the 'take away' was from this session.

Material

FACILITATORS: *If there is time do the stop & ask.*

start on adding self-care to my day.



Thinking back over today's session, what are the important points you will take away with you?

FACILITATORS: If not mentioned, make sure these points as included in the Take Aways from today's session.

To summarize, the Take Aways we hope you will take with you today are that:

- CGs are at an increased risk for certain health concerns and burnout.
- Self-Care is a deliberate action you take that improves your physical, mental, or emotional wellbeing.
- Understanding what keeps you from doing self-care can help you to increase the amount of self-care you do.
- Prioritizing addressing health concerns, finding support, practicing self-compassion, and adding laughter is a good start on adding self-care to my day.

Slide 20 Making This Work for You

Makin	g This V	Vork for	You Pick One			
Use the Se things you which area	entify Areas to V elf-Care Check L currently do for : as you are doing ich areas you ne	ist to identify the self-care. Notice well		ke a list of your to practice one	the Top Three op 3 self-care active a day. If needed, o smaller tasks.	
Set a Deadline	Why this one?	What will you pair it with?	Break it Down	Smaller Steps	Start Date and End Date	Reminders
Be realistic in your deadline.	How will this help you?	Do it with something you already do.	Take a large task and break it into step.	Make large steps into smaller steps.	For each step small or large, use a calendar	Use your computer or phone.

Considerations

- → The Action Plan is perhaps the most important part of this session.
- → Encourage the CGs to **pull out their pen and paper** and create an action plan right there.
- $\rightarrow\,$ Use the boxes along the bottom to assist in the creation of the action plans

Material Activity: Action Plan

ACTIVITY-Directions

FACILITATOR: Briefly define the steps.

INTRO: At the end of each session after our review we will work together to create an Action Plan whose purpose is to help you to figure out how you plan to use the skills and tools we explored today in session. To get the benefit from these tools, you have to do your part and practice them at home.

The Action Plan has 5 Steps

- 1. **Set a Deadline:** this is a deadline for when you will start and finish this goal. It is important to be realistic when you think about your deadlines.
- 2. Why choose this one?: The more personal you can make it the more likely it is to push you to complete your goal
- 3. What will you pair it with?: research tells us that piggybacking a new task onto something you already do routinely and consistently is a great way to jumpstart something new. It becomes an automatic reminder to do the new task.

OPTIONAL Break it down: Sometimes the skills and tools we teach can be complicated. At that time, you have the option to break it down into many different steps and just deal with each step as it's turn comes up.

- 4. Reminders: what reminders will you use? Be creative!
- 5. Problem Solving: One of the important parts of any goal making is the problem solving. When you just can't seem to get it done it is important to sit down, figure out what the issue is, brainstorm some solutions, and try out the one most likely to succeed. If it does succeed and you are able to do the task great! If not, then go back to your brainstormed list of solutions and try a new until you find what works.

ACTIVITY-Do it

Everyone should have paper and pen. Let's go through creating your own personal action plan stepby-step. As we go through these, write it down on your paper. A written plan has more weight than one you keep in your mind.

- People do better when they limit the number of changes they are trying to make.
 - Have the CGs choose either *ID Self-Care areas to Work On* or *Practice Top Three*
 - This example: My top three are to read more, work on my sleep habits, & attend my worship service more often. (Only illustrating one of these)
- 1. Set a deadline *Be realistic*
 - My sleep will be more on track within 1 month. I will be in bed by 10:30p and ready for sleep by 11:00p
- 2. Why chose this one? *The more personal the better*
 - I always feel exhausted, and I'm scared I will mess up something important.
- 3. What will you pair it with? Do it with something you already do
 - $\circ~$ I'm setting up a bedtime routine that will start at 10pm with the news.
- Optional: Break it down *Take a large task and break it into steps*
 - o I'm working on my bedtime routine, morning wake up, and no caffeine after 2p
 - Write out my routine with a time schedule
 - Set my morning alarm
 - After my first pot of coffee is done, I'll prep a de-caf pot
- 4. Reminders Computer, phone, calendar
 - o I'll put a Post It note on my bathroom mirror to remind myself why I am doing this
 - I'll set my phone with an alarm 15m after my alarm to remind myself to get out of bed.
- 5. Problem-solving *Pending* **FACILITATORS:** You may want to ask if participant anticipate any issues and plan for it.

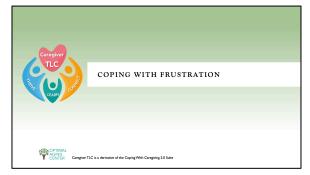
We will see you all next week. We will do a brief check in with y'all at the beginning of the session to see how you did on your Action Plan during the week and we'll help if you have run into any barriers. Please do let either me or [co-facilitator] know if you will be unable to attend next week.

FACILITATORS: feel free to make this more personal!

We are looking forward to seeing y'all next week!

67

Coping with Frustration



Aim of Module

To normalize CG's emotions experienced during caregiving. To provide strategies CGs can practice at home when frustration or anger become overwhelming.

Handouts - CG TLC 5HO Anger Mapping S.T.O.P.

Four Main Points

- 1. Both positive and negative emotions are a normal part of caregiving.
- 2. Emotions are one part how you feel, one part how your body reacts, one part how you behave.
- 3. There are different ways to proceed dependent on how angry you are.
- 4. Stop, Take ten breaths, Observe, and Proceed can help to give you space to respond rather than react when you are angry.

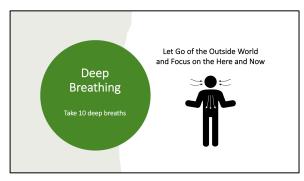
Activities

Action Plan

Activity 1: How Do You Know? Activity 2: 10 Breaths Activity 3: Self Talk Activity 4: Action Plan Activity 5: Website Exploration

Choice of 3: Practice Daily 10 Breaths Becoming Aware of Self-Talk S.T.O.P

Slide 2 Deep Breathing Practice



Let's take a moment to let go of all the worries and concerns that may be weighing on you right now. Together, let's take 10 deep breaths as we prepare to focus on the new material we'll be presenting today

Sit comfortably in a chair and close your eyes. Your feet should be flat on the floor and arms should be supported in comfortable manner. Try to sit so your shoulders are over your hips. If closing your eyes is

difficult for you, you can pick a place on the wall to stare at during this exercise.

Notice your breathing, just observe your own breath for a couple of breaths. (Pause for 2 breaths)

Now we are going to ask you to slow down your breathing to help you relax. To slow down, do a slow inhale through the nose, for a silent count of 5. Then do a slow exhale through the mouth, for the same count.

Breathe In, 2, 3, 4, 5, pause - Breathe Out, 2, 3, 4, 5, pause, (repeat 4 more times)Breathe In, 2, 3, 4, 5,Breathe In,- Breathe Out, 2, 3, 4, 5,- Breathe Out,(repeat 1 more time)- Breathe Out,(repeat 3 more times)

When you're ready open your eyes and come back to the room.

Now that everyone is ready, let's check in and see how your Action Plans went last week.



Slide 3 Check In

Considerations

- → Not everyone will follow thru on the action plan, but it is still important to check in.
- → This is a good time to ask what happen and explore possible barriers.
- → Problem-solve barriers and illustrating with a volunteer how they can still use their action plan.

Material



Has anyone started last week's action plan they created at the end of the workshop last week?

Self-Care Check List

- ✓ What did you notice?
- ✓ Which of the four areas of self-care do you need, or did you work on?
- ✓ What stopped you from doing it?

Top Three Self-Care Activities

- ✓ What did you notice?
- ✓ Did you practice a self-care activity every day? How did it effect you?
- ✓ What stopped you from doing it?

Slide 4 Today's Topics



Considerations

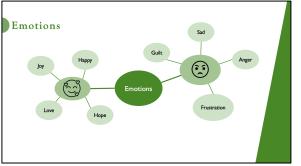
 \rightarrow This slide should be a quick introduction of what this session will cover.

Material

Today's Topic is about coping with frustration and anger. We'll start with discuss exactly what are these negative emotions. Then talk about the range of

intensity and why knowing where you are in the range is important. Then we will explore different strategies to use as your respond.

Slide 5 Positive & Negative Emotions



Considerations

- → Do not equate negative with bad or positive with good. Good and bad imply judgement and a participant who comes to you frustrated may turn that into the thought that they are bad. Emotion exists – how a person acts on the emotion can be helpful or harmful. Example: Anger can spur a person to hit someone, it can also spur a person to correct a misjustice that they have experienced.
- → The goal over the next few slides is in part to separate having an emotion and reacting to the emotion. It is almost impossible to stop a feeling. However, it is much easier to modify how you react when experiencing that feeling.
- → For those that struggle separating emotion and behavior? I feel... is an emotion. I [action word (do, yell, etc.)] ... is the reaction. It can be more complicated than this, but this is an easy shortcut.

Material

Positive emotions are those emotions we typically find pleasure in experiencing, feelings like joy or happiness, love, or hope. On the other hand, negative emotions are those emotions we do not find pleasurable to experience. These are feelings like sadness or guilt, anger, or frustration. **Neither side is 'good' or 'bad.'** Emotions serve a purpose - they can urge us to take action. For example – Anger can spur a person to hit or even kill someone. Anger can also provide the drive for a person to correct a misjustice that they have experienced.



How could emotions urge you to take action while caregiving?

FACILITATORS: The answers do not have to come from personal experience. Ask "how could" not "how did."

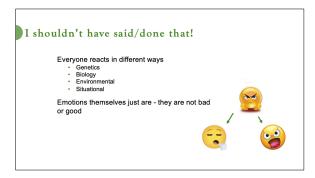
Emotions can also influence the decisions we make. For example, we may decide not to participate in an activity if we are feeling sad.



How could emotions influence your decisions while caregiving?

FACILITATORS: The answers do not have to come from personal experience.

There is a difference between how we feel about something (emotion) and what we do with that feeling (reaction).



Slide 6 I shouldn't have

Considerations

• At times, having examples ready to illustrate the different ways can assist in understanding

Material

It is important to remember that everyone reacts emotionally to events in different ways. There are a number of factors that encourage us to react in one way or another.

Genetics: your genes may influence how sensitive you are to emotional information

Biology: specifically, how responsive your limbic and autonomic nervous systems (ANS) are

- o Limbic system: categories emotional experiences as pleasant or unpleasant
- ANS: regulates physical response (pulse, blood pressure, breathing) to emotional cues

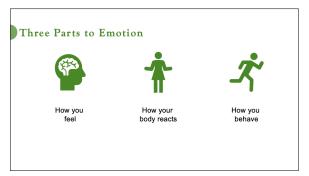
Environmentally: how responsive you are to the environment - how bright the lights are, did you get enough sleep, how hot or cold is it

Situational factors: is the situation dangerous, has it happened before (responses change over time you might not react the 1st time but the 5th time? The 10th time?)

Not only does the factors change from person to person, but they can also change for the same person from situation to situation. It's important to note that most emotions come and go – if you feel stuck in the same negative emotion for a long time and find it effects your ability to do the things you normally do then you may want to seek some extra help.

71

Slide 7 Three Parts to Emotion



Considerations

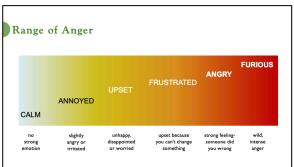
→ Emotions just are, but how we react to that emotion is something we can change.

Material

There are three different parts to how someone experiences an emotion. **The first** is how you feel the emotion, an example is I feel angry. **The second** is how your body reacts to the emotion – my fists are

clenched, my brow is scrunched, shoulders are tense, etc. **And finally,** how you behave in response to the emotion – I yell, some people may cry, some people may kick or punch. Your body can serve as an early warning sign to clue you in to what emotion you are experiencing.

Our target is not to change the fact you feel an emotion but how you behave in reaction to that emotion



Slide 8 Range of Anger

Considerations

→ Not every CG is aware of the emotions they are experiencing. If they appear to struggle, they may need a referral to a therapist to learn to identify and work with the feelings they are experiencing.

Material

Although CGs do experience other negative emotions such as sadness, guilt, and blame. Today our focus is on

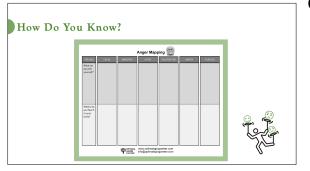
frustration and how it turns into anger that interferes with your ability to provide care. As you get towards the right side, the more primitive the emotion is and the easier it is to slip into uncharacteristic behaviors. We discuss the range of anger, because once you are experiencing furious it is hard to reason yourself out of it. Where you are in the range will also help you to decide which is the best method to use to return to calm.

Let's description the emotions in the range:

- Calm being free of strong emotion
- Annoyed feeling slightly angry or irritated
- Upset feeling unhappy, disappointed, or worried
- Frustrated feeling distress due to inability to change or achieve something
- Angry strong feeling experienced when you feel someone has done you wrong
- Furious feeling of wild, intense anger

So how do you know where you are in this range?

Slide 9 How Do You Know?



Considerations

- → Offering an example of the self-talk in each category can be helpful but be wary, this is a discovery process and if you supply them with an answer too early, they may not personalize it.
- → Some CGs will find it easy to be aware of what they are thinking in the 'heat' of the moment, others will need assistance.

Material

Activity: How Do You Know?

Some people just know. For those that don't your body can give you a clue.

ACTIVITY-Directions

We will not ask you to share this information, it is private and only for you use. For many of you, you may not have ever been asked to think about your emotions in this way and it may prove difficult. We ask that you stick with it as this information is very important for you as it can help you figure out the best strategy to manage your response to emotions in this range.

ACTIVITY-Do it

Everyone should have a copy of the handout. If not, you can use a pen and paper and following along with what is on the screen.

- We all tell ourselves things when we experience strong emotions.
 - When we are calm, we might say something like: "Life is good right now."
 - We note that in our body our shoulders are relaxed, our breathing is measured, neither fast nor slow, we may be smiling.
- On the other hand, when we are furious
 - We may say something: "I'm so angry, I hate being a CG."
 - The body feels tight and tense, fists are clenched, face may feel hot, may be scowling.

Look at the form in your packet titled Anger Mapping. You'll note there are emotions across the top, and on the left, there are two separate categories – what do you tell yourself and where do you feel it in your body. Today we are going to start with furious and we are going to give you 2 mins to write down where do you feel it in your body first. (Pause for 2m). Now that you've got that down we want you to think about what you tend to tell yourself when you are furious. We'll give you 2 mins to write that down. (Pause for 2m).

FACILITATORS: walk them through filling out furious, frustrated, annoyed, and finally calm giving them a few minutes for each one.

What we are thinking and what our bodies tell us are both clues to where we are in the range of anger.

Slide 10 Taking 10 Deep Breaths

Giving you space to	respond rather than react
FIRST TIME	Sit comfortably in a chair and close your eyes. Notice your breathing. Just observe your own breath for a couple of breaths.
STEP 1: SLOW	Breath in through your nose for a count of 5, pause Breath out through your mouth for a count of 5
STEP 2: TAKE 10	Continue this practice for at least 10 breath cycles (in/out).
STEP 3: REPEAT	If still upset, do another 10 breaths.

Considerations

→ If people have a medical issue with deep breath, they can just observe their breathing – if it is fast then return the breath to normal pace by adding a slight pause between the inhale and exhale. Or they can just start noting things about the breath itself. Is the air hot or cool? How does it feel in the throat? In the lungs? Can they trace the path of the breath?

Material

Like stress where we first taught this, many of the emotions experienced in this range can be perceived as a threat to our brains, which will in turn, trigger the fight or flight response. If you remember the first response you perceive is faster breathing. The same skill we taught you to slow your breathing, works well here. Taking 10 deep breaths tells your mind and body to stand down and is the foundation of allowing for a response instead of a reaction. It calms the mind and body and gives you the space to remember the disease and its contribution.

Activity: 10 Breaths

ACTIVITY-Directions

First Time: Sit comfortably in a chair and close your eyes. Notice your breathing, just observe your own breath for a couple of breaths.

Step 1: To slow down your breathing do a slow inhale through the nose, for a silent count of 5 (can be shorter or longer depending on your comfort level). Then do a slow exhale through the mouth, for a silent count of 5 (can be shorter or longer depending on your comfort level).

Step 2: Continue this practice for at least 10 breath cycles (in/out).

Step 3: If you are still upset, do another 10 breaths.

ACTIVITY-Do it

FACILTATORS: Walk them through the 10 breaths. If you need a script, it is in the front of this module.

Self Talk			
[an mean the diff	Il our self when we are a erence between handlir He does this on purpose. He hates me.	I'm a horrible caregiver

Slide 11 Self Talk

Considerations

- → We are meaner to ourselves then we would ever be to someone else. Remind people that they can tear themselves down or build themselves up. It is in what they tell themselves.
- → Many times, until they step back and listen, they really don't know what they are telling themselves.
- → For those that are locked into a struggle to maintain calm. Start with recommending respite a great

resource to finding respite is on the website. See end of last session.

Material

In our minds there is usually a running commentary on our actions. For some it may sound like someone from our childhood – supporting us, criticizing us, or even mocking us. That voice can remind us of our standards, or it can very mean. Many times, we routinely are meaner to ourselves than we would ever be to another. Those voices have been a part of who we are since childhood and for many, have become part of the background – listen to but not consciously heard. We want you to become aware of them again and take back control of you tell yourself.

Activity: Self Talk

ACTIVITY-Directions

These statements are common responses CGs may tell themselves. Let's spend a moment and rewrite this internal script. **FACILITATORS:** *Walk them through what else they could say.*

ACTIVITY-Do it

Scenario 1: Suzie is on a time schedule to get to an important appointment on time. Her husband with moderate stage dementia being incredibly difficult. She finds herself feeling incredibly frustrated and tells herself, "I just can't do this anymore."



What do you think happened next? What else could someone tell themselves in this situation? Would that change what happens next?

FACILIATATORS: Have the participants answers the questions.

What happened? Seeking out the negative result – they didn't make the appt/ yelling/ etc. What else could she tell herself? Alternative: This is tough right now, but I can do this. The change? Suzie takes 10 deep breaths and pushes through with more patience.

Scenario 2: Betty and Robert have been married a long time. Early in their marriage after a series of heated arguments, they decided that it wouldn't be fair for Robert to use Betty's Mom in an argument. Despite this agreement that has kept peace in their marriage for the last 40 years, all of a sudden, Robert who has been recently diagnosed with Lewy Body Dementia, is using her mom in arguments. Betty thinks: "He is doing this on purpose. He knows it makes me so angry."



What do you think happened next? What else could someone tell themselves in this situation? Would that change what happens next?

FACILIATATORS: Have the participants answers the questions.

What happened? Seeking out the negative result – they argue more and they are getting worse What else could she tell herself? Alternative: It's the disease causing his behavior, it isn't his fault. The change? Betty doesn't respond to the comments and the arguments aren't quite as hurtful.

ACTIVITY-Process



Is this something you have ever done? Is it something you see yourself doing? Why or why not?

Start small. First listen for the self-talk. What does it say? If it is not supportive – replace it with something more positive. Remember that negative self-talk can push your emotions up the range and positive self-talk can calm and give you some space. Caregiving is a hard job. Support is important – including your own for you.



Slide 12 STOP

Considerations

→ There is a fine distinction between these two.
 Reacting uses the emotion and is usually immediate.
 Responding uses reason and requires an assessment of the situation.

Material

Sometimes it just happens, despite all the precautions

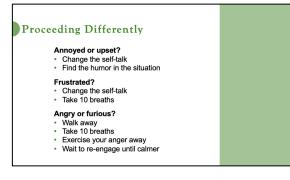
you put in place. You find yourself in a moment when you are reacting rather than responding. When you find yourself getting angry one method you can use to calm yourself down is S.T.O.P.

S stands for Stop	T is Take 10 breaths
O is Observe	P is Proceed Differently

- **Stop** means exactly what you think it does stop whatever it is you are doing in that moment. If you were about to say or do something don't.
- **Take 10 breaths** means right after you stop you take a minute, do 10 slow breaths physically you are sending a signal to your body to stand down.
- **Observe** gives you the space to actually see what is happening so you can respond rather than react. It gives you time to observe what you are saying to yourself and time to craft another response. Because you've done the work of earlier noting what you tend to tell yourself and practice telling yourself more positive statements it will be easier in the moment to tell yourself something like *No he isn't doing this on purpose It is the disease making him say that*.
- **Proceed Differently** means to move forward using the new information. We will talk about this more in a moment.

If you find yourself angry or frustrated and reacting emotionally often, making a small card with the STOP info on it to refer to can be helpful

Slide 13 Proceeding Differently



Considerations

→ Knowing where the CG is on the range of the emotion can allow them to tailor the response. It requires a certain level of psychological selfawareness. Some CGs will be more aware, some less, and a few will totally lack this awareness. They may need additional assistance.

Material

Know where you are in the range of emotion is important for knowing how to respond. Are you annoyed or upset? Frustrated? Angry or furious?

If you are **annoyed or upset**, you can:

- Change the self-talk
- Find the humor in the situation humor has more power than you think it has to defuse a situation like this. Humor can help you reframe problems that might otherwise seem overwhelming.



Have you ever used humor to defuse a situation? What about in a caregiving situation?

If you are **frustrated**, you can:

Change the self-talk
 Take 10 breaths

If you are angry or furious, you can:

- Walk away take yourself away from what is making you angry
- Take 10 breaths you will probably need more than one set
- Exercise your anger away some people describe this type of anger as spiky energy that won't let them calm down. Exercise (like vigorous housekeeping) can be pretty effective
- Wait to re-engage until calmer this is very important! Do not re-engage while still angry. As you calm down watch for negative self-talk that is feeding the anger.

Reminder Filling out the Anger Mapping form can help you find the clues needed to know where you are on the range.

Slide 14 Take Away

Ta	ke Away
	 Both positive and negative emotions are a normal pare of caregiving.
	 Emotions are one part how you feel, one part how your body reacts, one part how you behave.

- There are different ways to proceed dependent on how angry you are.
- Stop, Take ten breaths, Observe, and Proceed can help to give you space to respond rather than react when you are angry.

Material FACILITATORS: *If there is time do the stop & ask.*



Thinking back over today's session, what are the important points you will take away with you?

FACILITATORS: If not mentioned, make sure these points as included in the Take Aways from today's session.

To summarize, the Take Aways we hope you will take with you today are that:

- Both positive and negative emotions are a normal part of caregiving.
- Emotions are one part how you feel, one part how your body reacts, one part how you act.
- There are different ways to proceed dependent on how angry you are.
- Stop, Take ten breaths, Observe, and Proceed can help to give you space to respond rather than react when you are angry.



Slide 15 Making This Work for You

Considerations

- \rightarrow The Action Plan is the most important part.
- \rightarrow Encourage the CGs to **pull out their pen and paper** and create an action plan right there.
- \rightarrow Use the boxes along the bottom to assist in the creation of the action plan.

Material

Activity: Action Plan

ACTIVITY-Directions

FACILITATOR: Briefly define the steps.

INTRO: At the end of each session after our review we will work together to create an Action Plan whose purpose is to help you to figure out how you plan to use the skills and tools we explored today in session. To get the benefit from these tools, you have to do your part and practice them at home.

The Action Plan has 5 Steps

- **1. Set a Deadline:** this is a deadline for when you will start and finish this goal. It is important to be realistic when you think about your deadlines.
- 2. Why choose this one?: The more personal you can make it the more likely it is to push you to complete your goal
- **3.** What will you pair it with?: research tells us that piggybacking a new task onto something you already do routinely and consistently is a great way to jumpstart something new. It becomes an automatic reminder to do the new task.

OPTIONAL Break it down: Sometimes the skills and tools we teach can be complicated. At that time, you have the option to break it down into many different steps and just deal with each step as it's turn comes up.

- 4. Reminders: what reminders will you use? Be creative!
- 5. Problem Solving: One of the important parts of any goal making is the problem solving. When you just can't seem to get it done it is important to sit down, figure out what the issue is, brainstorm some solutions, and try out the one most likely to succeed. If it does succeed and you are able to do the task great! If not, then go back to your brainstormed list of solutions and try a new until you find what works.

ACTIVITY-Do it

Everyone should have paper and pen. Let's go through creating your own personal action plan stepby-step. As we go through these, write it down on your paper. A written plan has more weight than one you keep in your mind.

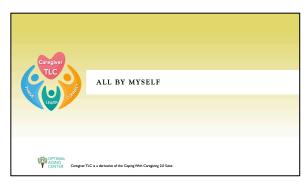
- People do better when they limit the number of changes they are trying to make.
 - Have the CGs choose either 10 breaths, self-talk, or using S.T.O.P.
 - o This example: Self-talk
- 1. Set a deadline *Be realistic*
 - By next Tuesday (one week) I will have practice becoming aware of my self-talk 5 times.
- 2. Why chose this one? The more personal the better
 - I always feel exhausted, and I'm scared I will mess up something important.
- 3. What will you pair it with? Do it with something you already do
 - After an outburst, I usually sit at the kitchen table to calm down so I will do it then.
- Optional: Break it down Take a large task and break it into steps
 - I will keep my notebook visible, so I see it and remember to do it.
 - I will write the instructions in red on one of the pages
- 4. Reminders Computer, phone, calendar
 - o I'll write STOP on the white board in the kitchen
 - I'll also make a reminder in my phone to reminding in the morning to work on it
- 5. Problem-solving *Pending*

FACILITATORS: You may want to ask if participant anticipate any issues and plan for it.

We will see you all next week. We will do a brief check in with y'all at the beginning of the session to see how you did on your Action Plan during the week and we'll help if you have run into any barriers. Please do let either me or [co-facilitator] know if you will be unable to attend next week.

Next week is our final session and we hope you all will attend. We'll be discussing ways to reach out even when you can't leave the house. In addition, it will be an opportunity to celebrate all you have learned while attending this workshop and plan for the future as you continue your caregiving journey. We are looking forward to seeing y'all next week!

All By Myself



3 Aims of this Module

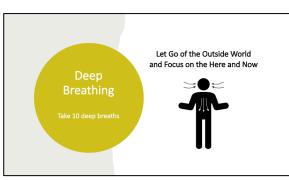
- To address the isolation experienced by caregivers by examining available online support.
- Review of skills learned during the workshop and plan for the future
- Celebrate the completion of the workshop

Handouts - CG TLC 6HO

ALZ San Diego's 9 cognitively stimulating activities GeriPal's Staying Connected: Things to Do Making it Personal: Planning for the Future

Activities

Activity 1: Review S40-S45 Activity 2: Making it Personal: Planning for the Future



Slide 2 Deep Breathing Practice

Let's take a moment to let go of all the worries and concerns that may be weighing on you right now. Together, let's take 10 deep breaths as we prepare to focus on the new material we'll be presenting today

Sit comfortably in a chair and close your eyes.

Notice your breathing, just observe your own breath for a couple of breaths. (*Pause for 2 breaths*)

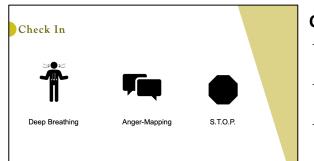
Now we are going to ask you to slow down your breathing to help you relax. To slow down, do a slow inhale through the nose, for a silent count of 5. Then do a slow exhale through the mouth, for the same count.

Breathe In, 2, 3, 4, 5, pause - Breathe Out, 2, 3, 4, 5, pause, (repeat 4 more times)Breathe In, 2, 3, 4, 5,- Breathe Out, 2, 3, 4, 5,Breathe In,- Breathe Out,(repeat 3 more times)

When you're ready open your eyes and come back to the room.

Now that everyone is ready, let's check in and see how your Action Plans went last week.

Slide 3 Check In



Considerations

- → Not everyone will follow thru on the action plan, but it is still important to check in.
- → This is a good time to ask what happen and explore possible barriers.
- → Problem-solve barriers and illustrating with a **volunteer** how they can still use their action plan.

Material



Has anyone started last week's action plan they created at the end of the workshop last week?

Deep Breathing

- ✓ Did you work on your deep breathing while feeling frustrated or anger during the week?
- ✓ If not, what prevented you from doing it?
- ✓ If you did, did it change anything?

Anger-Mapping

- ✓ Did anyone choose to work on the anger mapping?
- ✓ Which was more difficult? Identifying the emotion or the physical clues?
- ✓ Once you became more aware of what emotion you were experiencing, how did you use that information?

S.T.O.P

- ✓ Did anybody use the S.T.O.P. steps to interrupt their reaction to an emotion?
- ✓ Did it change how you responded?



Slide 4 Today's Topics

Considerations

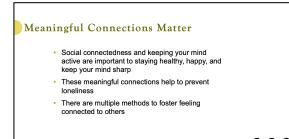
- → This slide should be a quick introduction of what this session will cover.
- → This is a very full session. Facilitators should plan for 30 mins for part 1, 45 mins for part 2 and 15 mins for part 3.

Material

Today we are going to talk about loneliness and

caregiving. Then we'll review the material we've covered so far which includes some planning for the future. Finally, we'll celebrate the effort and time you've invested in this workshop.

Slide 5 Meaningful Connections Matter



Material

Let's talk a moment about loneliness and isolation. Loneliness and Isolation are different, although they are often used for one another.

- Social isolation is the **absence of social contact** the number of people in your life is lacking.
- Loneliness is **feeling** sadness or unease because you're alone.

One does not automatically lead to the other. We all know people who appear to be very comfortable with limited interaction with other people. Many call them introverts. They have one or two close friends, and they are happy. We also know people who report feeling alone in the middle of a crowd surrounded by people. So, loneliness is not necessarily about being alone - It's about feeling alone. Loneliness is both complex and unique to each person. Social connections are one way to address loneliness.

There are three important parts to social connection:

- How often and who you connect with
- The physical or emotional support you get from your connections

 $h \otimes$

• How you feel about your connections - whether you feel lonely or a sense of belonging

The key to addressing loneliness for many people is feeling socially connected and being happy with those connections. There are many ways to feel connected to others.

Slide 6 Creating Social Connectedness



Material

The best way to foster social connectedness is to create a large support network with many connection points. These points can be to friends, family members, other caregivers, or through professionals.

We know for many of you, the pandemic has seriously limited your support network. Today we will we be looking at ways on the internet to increase your

contacts so that you feel connected to others and less isolated even if you can't get out of the house. The more connection points you have, the better it can weather any disruptions.

We'll be looking at a variety of ways you can reach out online, such as virtual support groups, message boards, helplines, and social media. We will also talk about where you can find each of these online. It is important to remember that along with these methods of support you can also reach out online in other ways to be connected. Since the pandemic, many places you would have once only seen in person now have developed quite an outreach program on the internet.

We have two handouts which describe many of the programs in greater detail but here's a quick introduction.

- Many local libraries, and organizations like Senior Planet and Well Connected have developed • unique seminars and workshops on a variety of topics.
- Religious communities of many different faiths now have an online presence where you can read articles, attend sermons, and even listen to inspirational music.
- Museums and Zoos all over the world offer virtual visits and interactive tours. Families, although separated by miles and a virus can still attend together virtually and talk about what you've seen.
- The YMCA among other fitness places offer online classes so you can continue to attend exercise classes with friends while each safe in your own home.
- Both Handouts have a variety of things to try out and come complete with the URLs so you can find them.

Slide 7 Where to go in a Crisis: Helplines / Hotlines

Where to go in a Crisis: Helplines / Hotlines

WHAT:

Helplines for Caregivers

Alzheimer's Association 24/7 Helpline (800-272-3900)

Check website of specific chronic illness foundations/associations.

- Non-judgmental listening services for people in crisis Offered by telephone, may also be email, web or text support Can also offer access to information, services, and advice
- WHY:

 Sometimes it can be very freeing to talk with someone who is completely
 objective
- objective Most are 24/7, so in the dead of the night when you are laying awake worrying it is nice to have someone to talk with

CAUTION: You are not guaranteed to talk to the same person every time

Material

Let's start with where you can go in a crisis. A helpline is a special telephone service that people can call to get advice about a particular subject. What are they?

- Non-judgmental listening services for people in crisis
- Offered by telephone, may also be email, web, or text support
- Can also offer information, services, and advice

Why should you consider using a helpline?

Institute on Aging Friendship Line (800-971-0016) • 24-hour toll-free Friendship Line • Founded in 1973, it is the only accredited crisis line in the country for people aged 60 years and older, and adults living with disabilities

24/7, 365 days a year Specialists and master's-level clinicians offer confidential support and information to people liv with the disease, caregivers, families and the public live chat from https://www.aiz.org/help-support/resources/helpline available from 7 am. -7.pm. (CST) Monday through Friday

Caregiver Help Desk (855-27-3640) Caregiving experts are available 8:00 AM – 7:00 PM ET. Hosted by Caregiver Action Network and staffed by caregiving experts, helps caregivers to find the right information needed to help navigate complex caregiving challenges. Live chat/email available from https://caregiveraction.org/

- Sometimes it can be very freeing to talk with someone who is completely objective
- Most are 24/7, so in the dead of the night when you are lying awake worrying it is nice to have someone to talk with

CAUTION: You are not guaranteed to talk to the same person every time so if you connect with someone you may not be able to, or it may be difficult to chat with them again.

Slide 8 Helplines for Caregivers

Material

Institute on Aging Friendship Line (800-971-0016)

- 24-hour toll-free Friendship Line
- Founded in 1973, it is the only accredited crisis line in the country for people aged 60 years and older, and adults living with disabilities

Alzheimer's Association 24/7 Helpline (800-272-3900)

- 24/7, 365 days a year
- Specialists and master's-level clinicians offer confidential support and information to people living with the disease, CGs, families and the public
- live chat from https://www.alz.org/help-support/resources/helpline available from 7a-7p(CST) M-F

Caregiver Help Desk (855-227-3640)

Support groups focus on sharing personal experiences and feelings, coping strategies, or firsthand information

You may need to try out a variety of support group until you find one that fits you

- Caregiving experts are available 8:00 AM 7:00 PM ET.
- Hosted by Caregiver Action Network and staffed by caregiving experts, helps CGs to find the right information needed to help navigate complex caregiving challenges.
- Live chat/email available from https://caregiveraction.org/

Check website of specific chronic illness foundations/associations. Many have some type of help line available.



Material

As a CG I'm sure you've heard a lot about support groups. Support groups are one way to connect with others in a similar situation like yours. They are not for everyone. But some people find them every helpful.

What are they?

• Support groups focus on sharing personal experiences and feelings, coping strategies, or firsthand

information

Support Groups

WHAT:

WHY:

CAUTION:

Feel less alone
Source of practical advice

Why do people keep recommending them?

- People who attend support group report feeling less alone.
- They can be a source of practical advice many time the members 'have been there and done that' and can share what worked and what didn't

CAUTION: You may need to try out a variety of support groups until you find one that fits you since there are many kinds of support groups to consider

- Condition-specific groups: Parkinson Disease group vs Alzheimer's Disease group
- Groups targeting different kinds of CGs: spouses, children, men, women, etc.
- Peer-led support groups: led by a caregiver or someone who may have been a caregiver
- Groups led by a trained facilitator: led by someone trained to lead support groups

Slide 10 Support Groups: Pros & Cons

Material

In general, there are a lot of positives to joining a support group where you feel comfortable sharing,

Pros include:

- Feeling less lonely or isolated
- Improving skills to cope with challenges
- Improving understanding of a disease
- Learning about health, economic or social resources

Support Groups: Pros and Cons

Feeling less lonely or isolated
 Improving skills to cope with challenges
 Improving understanding of a disease
 Learning about health, economic or social resources

Not helpful for everyoneMany groups do not do problem solving

Some can end up leaving you feeling worse than when you arrived No way of knowing if material offered is evidence-based

Cons:

There are also cons to support groups as well:

- While support groups can benefit most people that attend, they are not helpful for all
- Many groups do not do problem solving, leaving members to apply new information by themselves
- Some groups without active moderation can fall into rant session leaving members feeling worse than when they arrived
- You don't know if the information shared has any evidence behind it

Slide 11 Finding One That Fits

Material

If a support group sounds like it might be doable but how do you find one that fits?

Understand the Format Manage Expectations

- Manage Expectation
 Cost Involved
- Don't Have to Stay

Finding on That Fits

Keep an Open Mind



Find out what the format is.

- Does the group have a facilitator / trained leader / peer led?
- Ask about the group's confidentiality policy should encourage a level of privacy where what's said in the group stays in the group.
- Know the difference between a virtual support group and an in-person support group
 - o Both have a meeting date and time and certain frequency they meet (weekly/monthly)
 - In person meets at a location you go to.
 - Virtual meets on the computer through a teleconference program like Zoom or Skype

Mayo Clinic notes there are specific benefits to virtual groups which include:

- More frequent or flexible participation
- Opportunities for those without local face-to-face support groups
- A degree of privacy or anonymity

Manage Expectations.

• Friends don't magically appear – you must work at it. Be prepared to introduce yourself, be friendly, reach out to offer support and be open to accepting support in return.

Know that most groups are free to join.

Be wary if they charge. Ask why there is a fee. Some reasons why groups charge:

- Pay the facilitator or site.
- To encourage group stability people value what they pay for, so they show up
- And there may be other reasons

Don't feel obligated to stay with a group if it doesn't feel right for you.

• You can always leave a group, but it is good to come a few times/stay for a week online to get a feel for what the group is like.

85

Keep an open mind.

 The important thing is to find a space where you can share stories, feelings, and advice with people who can relate, without judgment. Knowing that you are not alone can make a world of difference.

Slide 12 Where to Find a Support Group



Material

Family Caregiver Alliance offers an unmoderated email list style support for families, partners, and other CGs who want a safe place to discuss the stresses, challenges, and rewards of providing care for adults with disorders such as Alzheimer's, stroke, brain injury, and other chronic debilitating health conditions. They also offer an online support group for lesbian, gay, bisexual, and transgender CGs of adults with chronic

health problems to discuss the unique issues of caring for their loved ones. https://www.caregiver.org/connecting-caregivers/support-groups/

Well Spouse Association org for spousal CGs across all chronic illnesses. Although the groups are member-based, the website has many free resources https://wellspouse.org/

Looking for something local and in-person (some of these also offer virtual support groups)?

- Look at your local hospital and/or major health center
- Local Area on Aging may offer support groups. https://www.n4a.org/ Check out the major organizations for the illness of the person you are caring for. Many will have local chapters

Many offer both online and in-person groups depending on where you live: four examples follow.

American Heart Association

• for cardiovascular diseases offers a searchable database of support groups https://www.stroke.org/en/stroke-support-group-finder

Michael J Fox Foundation

• for Parkinson Disease has a support group page that lists available online groups. https://www.michaeljfox.org/news/support-groups

Alzheimer's Association

 offers a searchable database of support groups, supports research, and offers great information via website

https://www.alz.org/events/event_search

Lewy Body Dementia Association

• LBDA raises awareness, supports patients, families and CGs and promotes scientific advancements. They offer a support-group-locator tool to help you find local group. https://www.lbda.org/local-support-groups/

Find your local Area on Aging https://www.n4a.org/

Slide 13 Online Message Boards

Online Message Boards

WHAT:

- Online message boards serves the same goals of a support group without the structure of attending a once a week 'event'
 Available 24/7 you post your question or share an answer on your schedule
- WHY:
- Along with feeling less alone & being a source of practical advice online message boards are available when you need them
- CAUTION
- You don't know who is offering the advice so make sure you verify the information before you use it!

Material

A message board is an online discussion site where people can hold conversations in the form of posted messages.

What are online message boards?

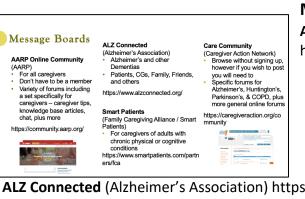
- Online message boards serve the same goals of a support group without the structure of attending a once a week 'event'
- Available 24/7, you post your question or share an answer on your schedule •

Why should you consider an online message board?

Along with feeling less alone & being a source of practical advice online message boards are available when you need them

CAUTION:

You don't know who is offering the advice so verify the information before you use it!



Slide 14 Message Boards

Material

AARP Online Community (AARP)

https://community.aarp.org

- For all CGs •
- Don't have to be an AARP member or be over the age of 50 to use
- They offer a variety of forums including a set specifically for CGs with CG tips, knowledge base articles, chat, plus more

ALZ Connected (Alzheimer's Association) https://www.alzconnected.org/

- free online community
- Alzheimer's and other Dementias •
- People with the disease, CGs, Family members, Friends, Individuals who have lost someone to Alzheimer's

Smart Patients (Family Caregiving Alliance / Smart Patients)

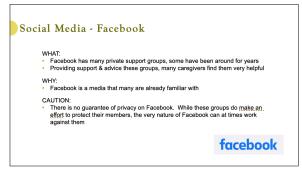
https://www.smartpatients.com/partners/fca

For CGs of adults with chronic physical or cognitive conditions such as Alzheimer's, stroke, Parkinson's, and other illnesses

Care Community (Caregiver Action Network) https://caregiveraction.org/community

- browse without signing up, however if you wish to post or comment you will need to •
- various specific forums for Alzheimer's, Huntington's, Parkinson's, & COPD, plus more general online forums

Slide 15 Social Media-Facebook



Material

Facebook is a website which allows users, who sign-up for free profiles, to connect online with friends, work colleagues or people they don't know. It allows users to share pictures, music, videos, and articles, as well as their own thoughts and opinions with however many people they like.

Private groups are Facebook code for groups which

require members to join individual groups and posts can only be viewed by members of the group. This means what you post will not show to your Facebook friends unless they are also a members of the group.

What are private Facebook groups?

- Facebook has many private support groups, some have been around for years
- Providing support & advice these groups, many CGs find them very helpful

Why should you consider one?

• Facebook is a media that many are already familiar with and some of these groups have been around for a very long time so they should have people with a lot of experience in them

CAUTION:

• There is no guarantee of privacy on Facebook. While these groups do make an effort to protect their members, the very nature of Facebook can at times work against them

Slide 16 Facebook Caregiver Groups for All Caregivers



How to sign up for a private Facebook group (https://www.facebook.com/help/345121355559712/)

Material

Caregiver Nation

This is a group for family CGs. They share information, understanding, empathy, and resources so that CGs never feel alone or unsupported in their efforts. https://www.facebook.com/groups/122999778390804

Working Daughter

This is for women who are balancing caring for an aging parent with their career. They promote community, support, and encouragement. They encourage you to share questions and advice. https://www.facebook.com/groups/workingdaughter/

The Caregiver Space Community offers a variety of private Facebook groups

These private Facebook groups are part of Caregiver Space.org and open to any CG providing care and are specific. https://thecaregiverspace.org/ They offer groups for: *Spousal Care* Caring for a romantic partner or ex. Caregiving Parents Caring for child or grandchild Eldercare Caring for seniors Young Caregivers CGs under 35 Long-term Care Caregiving lasting years After Caregiving Post caregiving Caregiving Sons Men's group Caregiving Daughters Women's group Spousal Care: 20s, 30s & 40s Young people caregiving for a romantic partner LGBTQIAP+ Caregivers For sharing issues specific to the LGBTIAP+ community

Slide 17 Facebook Caregiver Groups for Dementia

Facebook Caregiver Groups for Dementia

Memory People They bring real-time Support to patients, caregivers, advocates, family members and professionals who are dealing with Atzheimer's/dementia or any memory impairment. https://www.facebook.com/groups/180666768616259?ref=pages group cta

The Purple Sherpa Basecamp: Dementia Family Caregiver Support Group This is a place to share what we've learned as care-partners, to vent and support one another, and to break the silence that leaves so many caregivers feeling alone. https://www.facebook.com/groups/ThePurpleSherpaBasecamp/

Material

Memory People

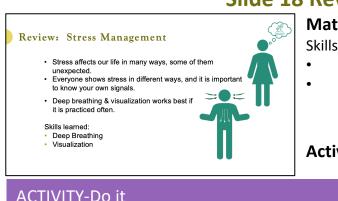
https://www.facebook.com/groups/180666768616259 They bring real-time Support to patients, CGs, advocates, family members and professionals who are dealing with Alzheimer's/dementia or any memory impairment.

The Purple Sherpa Basecamp: Dementia Family Caregiver Support Group

This is a place to share what we've learned as care-partners, to vent and support one another, and to break the silence that leaves so many CGs feeling alone.

https://www.facebook.com/groups/ThePurpleSherpaBasecamp/

The purpose of this section of today's session is to review the skills covered in the workshop to help the caregiver develop a plan to use these skills in the future.



Slide 18 Review: Stress Material

- Skills learned:
- Deep Breathing
 - Visualization

Activity: Review

ACTIVITY-Do it



Thinking back to our first session on stress 5 weeks ago, what were the important points you remember? Are you using Deep Breathing or Visualization?

FACILITATORS: If not mentioned, make sure these points are included from session 1.

To summarize, the Take Aways we hope you will remember are that:

- Stress affects our life in many ways, some of them unexpected.
- Everyone shows stress in different ways, and it is important to know your own signals.
- Deep breathing & visualization works best if it is practiced often.

Slide 19 Review: Mood Management





Thinking back to our second session on mood 4 weeks ago, what were the important points you remember? Do you have 10 solid positive activities you can depend on to elevate your mood?

FACILITATORS: If not mentioned, make sure these points are included from session 2.

To summarize, the Take Aways we hope you will remember are that:

- Depressive symptoms are common during caregiving. Taking the time to enjoy yourself will help you feel less stressed and a better CG.
- Scheduling and then doing positive activities can help to manage mood.
- It is important to do the scheduled activity, even if you don't feel like it. Make a plan and do the plan trust in the process.
- Doing Positive Activities together with the person being cared for can help to manage their mood as well. However, it may take time and a trial-and-error process to get this to happen on a regular basis.

Slide 20 Review: Nurturing Resilience

Review: Nurturing Resilience

- The ability to bounce back from a crisis is something you can work on and make better
 Powing your brain to look for the positive can ingrace your core of
- Rewiring your brain to look for the positive can increase your sense of well-being
 Identifying your care team will help you to: appreciate
- what is working well, plan for future difficulties, manage the people involved, identify missing people and services and communicate with everyone. Skills learned:
- Focusing on the PositiveAtlas CareMap



Material

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Skills learned:

- Focusing on the Positive
- Atlas CareMap

Activity: Review

ACTIVITY-Do it



Thinking back to our third session on resilience 3 weeks ago, what were the important points you remember? Did you journal for the 21 days a gratitude, kind act or positive experience? Did you notice a change in how you look at the world? Has any refined their Atlas CareMap that we worked on in session? What have you learned from it?

FACILITATORS: If not mentioned, make sure these points are included from session 3.

To summarize, the Take Aways we hope you will remember are that:

- The ability to bounce back from a crisis is something you can work on and make better
- Rewiring your brain to look for the positive can increase your sense of well-being
- Identifying your care team will help you to: appreciate what is working well, plan for future difficulties, manage the people involved, identify missing people and services, and communicate with everyone.

Slide 21 Review: Self-Care

Review: Self-Care

- CGs are at an increased risk for certain health concerns and burnout.
 Self-Care is a deliberate action you take that improves your physical, mental, or emotional well-being.
- Understanding what keeps you from doing self-care can help you to increase the amount of self-care you do.
 Prioritian addressing health exposure, finding
- Prioritizing addressing health concerns, finding support, practicing self-compassion, and adding laughter is a good start on adding self-care to my day.



- Skills learned: • Knowledge of their own participation in self-care
- Broadening their engagement in self-care

Material

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Skills learned:

- Knowledge of their own participation in self-care
 - Broadening their engagement in self-care

Activity: Review

ACTIVITY-Do it



Thinking back to our fourth session on Self-Care 2 weeks ago, what were the important points you remember? Are you doing more self-care type activities?

FACILITATORS: If not mentioned, make sure these points are included from session 4.

To summarize, the Take Aways we hope you will remember are that:

- CGs are at an increased risk for certain health concerns and burnout.
- Self-Care is a deliberate action you take that improves your physical, mental, or emotional well-being.
- Understanding what keeps you from doing self-care can help you to increase the amount of self-care you do.
- Prioritizing addressing health concerns, finding support, practicing self-compassion, and adding laughter is a good start on adding self-care to my day.

Slide 22 Review: Coping with Frustration

Review: Coping with Frustration

- Both positive and negative emotions are a normal part of caregiving.
 Emotions are one part how you feel, one part how your body reacts, one
- part how you behave.

 There are different ways to proceed dependent on how
- angry you are. • Stop, Take ten breaths, Observe, and Proceed can help to give you space to respond rather than react when you are angry.

Skills learned:

S.T.O.P.

- Anger Mapping
 Awareness of self-talk
- d Proceed can help to an react when you are

Material

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Skills learned:

- Awareness of self-talk
- S.T.O.P.

Activity: Review

ACTIVITY-Do it



Thinking back to our fifth session on frustration last week, what were the important points you remember? How are you using the tips and strategies like taking 10 breaths, changing your self-talk, or STOP?

FACILITATORS: If not mentioned, make sure these points are included from session 5.

To summarize, the Take Aways we hope you will remember are that:

- Both positive and negative emotions are a normal part of caregiving.
- Emotions are one part how you feel, one part how your body reacts, one part how you behave.
- There are different ways to proceed dependent on how angry you are.
- Stop, Take ten breaths, Observe, and Proceed can help to give you space to respond rather than react when you are angry.

Slide 23 Review: Finding Support



STOP

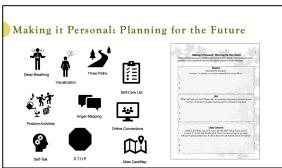
& ASK

Thinking back to our today's session on staying connected, what were the important points you remember? Are you planning to reach out online? What will you try first?

FACILITATORS: If not mentioned, make sure these points are included from session 6.

To summarize, the Take Aways we hope you will remember are that:

- Social connectedness is important to staying healthy and happy.
- These meaningful connections help to prevent loneliness
- There are multiple methods to foster feeling connected to others



Slide 24: Making it Personal

Material

Activity: Making it Personal: Planning for the Future

ACTIVITY-Directions

Skills need to be practiced if you want to get the most benefit from them. One way to do this is the action plan we worked on at the end of each session. Another way is to think about different situations and plan to use the skills you've learned over the last six weeks to address any of the issues you may experience. We'll do one situation together and then you'll personalize it by thinking of a caregiving situation you might run into and which of these new skills you'll use.

ACTIVITY-Do it

In your packet you'll find a form we will be working with called Making it Personal. You see three boxes. In the first we'll describe a situation, then select a skill that you'll plan to use and in the final box we'll think about what the most likely outcome will be if you do use that skill in that situation.

- 1. Situation: Describe the Situation
 - I'm helping my mom to get dressed for an appointment and she is being difficult.
- 2. Skill: Which skill will you use?
 - o When I get frustrated, I will use my deep breathing

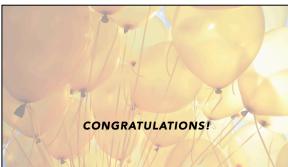
3. Likely Outcome: If you use the skill, what is the most likely outcome? What happen if you don't use it?

 If I do the deep breathing, then I'll be able to stay calm which will make helping mom much easier. If I don't get frustrated, I'll be able to help her to stay calm. If I don't then it is likely well be late or at the worse, we may not go at all. Now that we've done one together, you'll have an opportunity to personalize it and think of your own caregiving situation that you may experience. If you need a bit of help remembering? All of the skills are on the slide.

FACILITATORS: Give the participants 5 mins to fill out the form.



FACILITATORS: Help the participants to develop the Likely Outcomes both with and without using the skill. We are encouraging them to visualize their use of the skill as well as recognizing the benefits they gain from using these skills.



Slide 25+ Celebration

- → You will need to add the images of the certificates to the slides.
- → To aid you there is one blank which can be duplicated for as many participants as you have in the workshop who are receiving certificates.
- \rightarrow Plan for 15 mins for this section to give everyone time to speak.

Material

Acknowledge the time, effort, energy the participants have put into the workshop.

Add the participants' certificates to the slide set. As you go through them announce each participant. Let them know that they will receive their certificate via email.

Encourage them to continue to use their new skills. The more they use them, the more confident they become in the new skills, the more likely they are to use the skill when they need it.

