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**Dementia Experience**

*presented by*  
**Alzheimer’s & Dementia Services of Memphis, Inc.**

**Wednesday, September 19**  
9:00 a.m. – 2:30 p.m.  
(please allow 30 minutes for the experience.)

**Dorothy’s Place**  
3185 Hickory Hill Road

**FREE for ADS Caregivers**  
$10 for all others

Are you a caregiver for someone with dementia? Have you wondered what they are going through, why they do what they do?

This experience gives you an insight into the world of dementia by simulating the symptoms.

Here’s what one ADS Caregiver had to say, following the sensitivity experience:  
“I had prayed that I could get into my husband’s head to better understand. You just gave me that. Thank you.”

Call J.J. to sign up for a slot at 901-372-4585 or email: jdoughtie@adsmemphis.org

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**ADS Support Groups**

**Kennedy Park**

*Tuesday, August 14*  
Spousal Support Group 3:00 p.m. - 4:00 p.m.

*Tuesday, August 21*  
Coping with Caring Topic: Balancing Your Life When You’re a Caregiver 4:30 p.m. - 5:30 p.m.

*Wednesday, August 22*  
General Support Group 11:30 a.m. - 12:30 p.m.

**Dorothy’s Place**

*Wednesday, August 1*  
Spousal Support Group 9:30 a.m. - 10:30 a.m.

*Thursday, August 9*  
Coping with Caring Topic: Balancing Your Life When You’re a Caregiver 4:30 p.m. - 5:30 p.m.

*Thursday, August 16*  
General Support Group 4:30 p.m. - 5:30 p.m.

Support Groups are open to anyone in the community at no charge. If you know someone who needs a support group, please invite them.

*Free care for loved ones during all support groups.*

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CareLines is partially supported by the Aging Commission of the Mid-South.
The “Problem” with Alzheimer’s Day Care Programs

The moment you first set foot in an adult day care program may not feel like anything special. As you enter the room, you may see 10, 15 or even 20 people. Many of them are sitting in chairs arranged in a semicircle, or at tables, four to six per table. Some may not seem to notice you. For others, your presence is obvious – you are as much a stranger to them as they are to you. A group of men may beckon you to their table, or some ladies may gesture you to join them. The group is probably diverse. Initially, some individuals appear to have no disease at all; you may even wonder if they are visitors or staff. Others seem able to do nothing but sit at the tables or wander, apparently in worlds of their own. During the day there will be occasional upsets, outbursts and episodes. After all, Alzheimer's is a disease of the brain that impairs reasoning and causes personality changes. This neurological condition hinders the brain, truly challenging its victim’s ability to deal with an already complex world.

It won't be long before you can see the confusion and lost abilities. If that's all you see, you'll feel sorrow. But if you look deeper, there is something wonderful here, perhaps a silver lining or maybe just beauty in the eye of the beholder. Set aside your own fears and prejudices, and you can see there are some wonderful things taking place – right in front of you.

First, there are the people with the disease. Yes, they do have Alzheimer's, or any one of a variety of dementia-related disorders, including head trauma, stroke, Pick's disease, Lewy body disease, Down Syndrome, and alcohol-related dementia. But they are all people – people who may have a problem, but all beautiful, wonderful individuals, just the same. And it doesn't take long before this becomes apparent.

Next are the staff. Dementia is a challenging foe. Caring for others demands energy and understanding. Many participants are here because their families cannot deal with all of their needs at home. Logic, reasoning and memory are all diminished. Participants may attempt to leave the facility and "go home" to children long grown up, or back to jobs far in their pasts. These upsets are often more than mild.

The members of the staff are experts, familiar with sundowning, catastrophic reactions and personality changes. They learn what approach is best suited to each participant. You may hear apparent lies (fiblets) told to appease the upset person ("Yes, John, your mother is on her way to pick you up.") followed by redirection ("Let's go over here and talk to Robert until she gets here."). You'll see staff involve the participants in seemingly mundane activities such as cooking, or folding and refolding laundry” (washcloths, tee-shirts, rags). To the inexperienced eye, it may not seem like much, but what is going on before your eyes is exceptional. And for those who are lucky enough to be there, miracles are happening. People are relaxing, feeling useful, and enjoying the company of others.

This brings us to the third miracle taking place. People are inherently social animals. Without human interaction we become isolated, thus beginning a downward spiral – sadness, depression, loneliness, hopelessness. But here, where these debilitating diseases are understood and accepted, is a safe place for camaraderie and unquestioned friendship. Socialization is taking place and it is performing wonders – a non-prescription medicine, if you will.

Finally, you cannot help but be aware that there is also something very special present here: honest love. After all, who could do a job like this day after day, if they didn't love something about it? The love is all about the individual participants, the staff, and dealing with the disease. These are special people and special staff. There is Mamie, a character who has a great sense of humor and a smart-aleck comment for everyone. If you are

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The “Problem” with Alzheimer’s Day Care Programs

Patient, Beatrice, who sits silently for most of the day, may emerge from the fog and tell you all about how she taught calculus, trigonometry and algebra in a Jamaican school. There is Bill, who can tell you everything about B-52 bombers from the number of crew to the length of the wingspan. There is Phyllis, a social butterfly who delights at almost anything you say or do, from helping her assemble a five-piece puzzle to thumbing through a magazine that evokes stories of her Italian childhood. There is Cassie, who still dreams of being discovered by a Hollywood producer and starring in her own film. And there is Kathy, who never misses a chance to flirt, always asking, “What’s cookin’ good lookin’?” Once you see beyond the surface, there is a myriad of delightful personalities to be found, enjoyed, and appreciated.

When someone dies, there is mourning -- though often cloaked, it is painfully present. Alzheimer’s is a terminal disease and people do die from it. People disappear, chairs empty, and friends are missed. The vacuum they create serves to emphasize the love that was and remains felt for them. Their absence is truly sensed by all – participants and staff.

What is the “problem” with Alzheimer’s day care facilities? It’s that too few people know about them and take advantage of the love, miracles and wonders they create.

Adapted from: The Problem with Alzheimer’s Day Care Programs, Mark L. Warner, AIA, NCARB, www.alznews.com

Dealing With Boredom

Boredom can be another problem for people who are ill, and fighting it can take all your creativity. Try some of these below:

- Taking car or bus trips
- Listening to music, especially from the person’s youth
- Taking up hobbies
- Going to social events
- Playing board and card games

Adapted from “The Comfort of Home” 2nd Edition by Maria M. Meyer & Paula Derr 2002

I know my loved one’s heart. That cannot change.

The heart that keeps the beautiful things safe.

His outer world may be getting smaller and he cannot always express what’s in his heart, but I know how big and splendid his heart really is.

I smile and gently squeeze his hand.

He knows I know.

Inspirational Thoughts, from Coping with Caring by Lyn Roche, 1996
When interacting with a loved one, it is advised to approach from the front, to let the person know you are coming. Go slowly, because perception and reaction times slow as we age. Once in proximity, move to his or her side - you want to be supportive and not confrontational. Next, get low. Don’t let your height intimidate. Offer your hand, and let the person start the interaction. Call his or her name, the name that he or she prefers, and wait.

Start your message:
- Give basic information. “It’s time to…”
- Give simple choices. “This or that…”
- Give simple step directions by breaking down the task. “Let’s go to eat...lean forward...pull your feet in…”

Ask the person to help you, because it feels better for them to give than to receive.

Do not ask:
- “Are you ready?”
- “Do you want to?” because that offers the option of saying “No.”

Do not get wordy.
- Keep it short.
- Then, wait for a response.
- Silently count to ten.
- If there’s no response, ask again.

If he or she is responding, give positive touch and feedback:
- “Good job,” with a smile or nod.
- “Yes,” with a hug.
- “That’s it,” with a stroke or rub.

When communicating with a loved one, it is important to pay attention to the three ways in which you communicate: How you speak, what you say and how you respond. When speaking to him or her, how is your tone of voice? Remain friendly, not bossy or critical. How is your pitch of voice? A deeper voice is preferable to the high pitch often used for young children or pets. How fast is your speech? Speak slowly and easily, not pressured or fast. Use the positive approach methods detailed above. Pay close attention to how you respond to the person. Always be careful about personal space and touch, especially when he or she is distressed or being forceful. If what you’re doing is not working - stop, back off, and give the person space and time. Decide on what to do differently, and then try again.

Adapted from: Advanced Skill Building Workshop, LIAF Line, April 2006
Coping with Caring Sessions

(These topical and educational sessions are scheduled at Dorothy’s Place at 4:30 on the second Thursday of each month, and at Kennedy Park at 4:30 on the third Tuesday of each month.)

Coping with:
Balancing Your Life
When You’re a Caregiver

Presented by Ruthann Shelton
ADS Executive Director

Dorothy’s Place 3185 Hickory Hill Rd.
Thursday, August 9, 2018, 4:30-5:30

Open to the community
Free care for loved ones provided during sessions
Please let us know if your loved one will be coming.

Kennedy Park 4585 Raleigh LaGrange
Tuesday, August 21, 2018, 4:30-5:30

Tips for the Month of August

- You don’t have to entertain your loved one. Keep boredom for both of you at a minimum, but don’t wear yourself out trying to create things to do. A pleasant comfortable atmosphere is important.

- Music can be used to encourage exercise. Select appropriate background music for the exercises or activities your relative engages in. Routine mild exercise is extremely important. Using the same familiar music each time can be reassuring, encouraging, and serve as a helpful cue to movements.

- A sturdy rocking chair may be the answer to an anxious or fidgety loved one. Rocking might prove to be a good alternative to pacing.

- Give your home periodic and thorough safety checks. Keep in mind your loved one’s current level of dementia and safety-proof accordingly. All prescriptions and over-the-counter medications should be locked in a safe place. Sharp objects may have to be put away, electric appliances monitored or hidden, windows locked - do whatever it takes to help insure safety.

- Your loved one may not recognize when he is thirsty. Water is the most important liquid for him. Soda, coffee, tea and some juices can be strong and don’t take the place of water. Diluting these beverages can be a good idea - but make sure he drinks plenty of plain water every day.

- It’s a good idea for your loved one to go to the bathroom right before going to bed and before every meal.

- Agree, agree, agree. If agreeing with your loved one keeps peace and does not endanger her safety, don’t rock the boat by having to be right. She might be content during an activity that makes no sense to you at all. If it’s harmless and doesn’t present a real problem for you, let her do it.

- Closing all drapes and blinds at nighttime could help with sundowning. Keep the rooms well lit but not glaring. It might help to do whatever you can to make the atmosphere in your home seem like daytime.

Adapted from: Lyn Roche, Coping with Caring, Elder Books, 1996
Maintaining Caring Relationships with Spouses Affected by Alzheimer’s Disease

Here are some tips about how couples affected by Alzheimer’s disease can manage their relationship to sustain hope, connection, meaning and engagement, based on a study by Christine L. Williams, professor and director of the Program in Florida Atlantic University’s College of Nursing.

Engaging with compassion, patiently reaching out, and trusting in the existence of deep attachment, were three overall themes identified as spousal care.

In addition, communication patterns that can be helpful and meaningful include:

1. **News of the day**, providing caregivers and spouses with normalcy and serenity by talking about the activities of daily life.

2. **Sharing memories**, where caregivers attempt to reminisce with their spouses about memories of people and past events.

3. **Storytelling**, where caregivers tell a detailed story even though the conversation may seem like a monologue with no verbal participation from the spouse.

4. **Delighting in the unexpected**, where caregivers are overjoyed when their spouse contributes more to the conversation than expected.

The researchers observed that successful caregivers accepted a spouse’s version of the story, valuing the relationship more than being right and therefore refrained from interrupting or interjecting.

“It was evident that caregiving spouses bore most of the responsibility in maintaining the caring relationship, but there was evidence that the spouse affected by Alzheimer’s disease actively participated as well. In one conversation, maintaining eye contact with the spouse was the only obvious evidence of engagement. In another interaction, singing familiar songs provided an avenue for active involvement between partners,” said Williams.

The largest proportion of AD family caregivers are spouses.

“These caring ways of relating are of value because they provide information about what is possible in marital relationships affected by Alzheimer’s disease. Illuminating ways that couples demonstrate caring can be a source of strength to those who feel hopeless, discouraged and ready to give up, and can empower nurses to reach out to couples.”

Adapted from http://www.alzheimersreadingroom.com/2015/07/alzheimers-study-reveals-communication

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Please join us for the ADS monthly Spouse Support Groups:

- **Dorothy’s Place**: Wednesday, August 1, 9:30–10:30 (first Wednesday of the month)
- **Kennedy Park**: Tuesday, August 14, 3:00—4:00 (second Tuesday of the month)

Free care for loved ones during the meetings (Please inform us in advance if care is needed.)
Activities for August

(Please note that the activities are listed below to keep you informed of the special events that are scheduled at our two centers for those who are enrolled in the ADS program. We use the word "Friends" for those that attend our program. Please contact us if you would like more information about enrolling your loved one at either center.)

Dorothy’s Place Activities

Music Therapy with Rebecca, Tuesdays at 10:00 and Wednesdays at 2:00
Spanish Language Arts Therapy with Brigitte, Mondays at 2:00
Art Therapy with Kerry from Dixon, Tuesday, August 14, 1:30
Pet Therapy with Mid-South Pet Therapy, date to be decided
Music Entertainment with Brenda Buford-Shaw, Friday morning, August 24

Kennedy Park Activities

Music Therapy with Rebecca, Tuesdays at 2:00
Pet Therapy with Bunni and Megan, Wednesdays at 10:00
Spanish Language Arts Therapy with Brigitte, Thursdays at 10:00
Art Therapy with Kerry from Dixon, Tuesday, August 14, 10:00
Music Entertainment with Brenda Buford-Shaw, Thursday morning, August 23

This past month “Friends” greatly enjoyed the July 4 celebrations, with a sandbox scavenger hunt, “Go Fishing” game, and lots of great pictures with props from the Photo Booth! The July Talent show was a big hit, with poetry, piano playing, singing, dancing, and a great Elvis Presley impersonation! We look forward to continued fun and activities throughout the rest of the summer. Keep cool!

siblings Who Don’t Help

The top 3 excuses from siblings who don’t help with caregiving are: “I don’t have the time,” “I don’t have the money,” and “I can’t bear to see Mom/Dad like that.”

Caregivers need to examine whether or not they have made direct requests and have actually given siblings a chance to help. Some “outside” siblings complain that they aren’t let into the caregiving circle. This does happen. A caregiver who never directly asks for help doesn’t have the right to complain about unhelpful siblings. If you’ve talked to your siblings, you’ve directly asked them for help, and you’ve explained that there are different ways they can help, but you still get brushed off or told off, what can you do next?

One woman sent me a copy of a letter that she had written to her siblings. In the letter, she wrote that she had tried very hard to let them be part of the process of helping their parents through their last years. She repeated the requests she made and said she accepted their denial. She then, with courtesy, said she would no longer ask for help. She offered condolences to her siblings for all that they were missing and for the regrets they may have later on. She told them she chose to help their parents and thus live a life of peace after they were gone. She signed off lovingly.

The woman then moved on. She went to her state website and found the National Family Caregivers Support Program, from whom she received a lot of practical information. She contacted local senior help groups, got some respite through the local Senior Companion volunteers and she founded a support swap at her church.

This woman made it through without her siblings. She chose to let go of her anger and move on to find help elsewhere. I believed her when she said she was the only one in her family that felt peace upon her parents’ deaths.

Each caregiver has to know when to fight, and when to give up the battle and move on. There is no right or wrong time. It’s up to you.

Adapted from Agingcare.com, article by Carol Bradley Bursack, Top 3 Excuses from Siblings Who Don’t Help with Caregiving
PUT A POSITIVE SPIN ON PROBLEMS

Research suggests that optimism results in less stress, better health, greater success and more happiness. If you tend to see the glass as half empty, you may want to change your style - your explanatory style, that is, says M.J. Ryan, author of The Happiness Makeover (Broadway Books, 2005). “Learned optimism” expert Martin Seligman and others have found that optimistic thinkers tend to see bad events as fleeting and beyond their control, while pessimistic types tend to blame themselves for problems and figure they will last forever, says Ryan. On the other hand, pessimists consider positive events a fluke (“I was lucky.”), while optimists take credit for them (“I did well on the project because I worked hard on it.”).

To feel more contented and get more enjoyment out of life, Ryan recommends finding more positive ways to explain setbacks: “When things go wrong, remind yourself that the situation is temporary, confined to this one thing and outside of your control.” Conversely, when things go well, ask yourself: “What about me made this wonderful thing happen?”

“Optimism is really a verb, not a noun,” says Ryan. “The more we practice it, the better we’ll feel.”

Adapted from www.caringtodaymagazine.com, Mary Elizabeth Terzella, Caring Today July, 2006

Save the Date:
Tuesday, November 13, 2018
8:30 am - 3:30 pm
Bartlett Station Municipal Center, 5868 Stage Rd.

ADS Free Caregiver Conference
A Caregiver’s Journey: The Garden in Our Backyard
Free On-Site Care by Senior Helpers

Sponsors to date include:
The Bradley Law Firm
Memphis Funeral Home

Registration information coming soon.

Free Continental Breakfast and Lunch!

Meet other Caregivers!
Informative Sessions!
Lots of Helpful Resources!