

ADS SUPPORT GROUPS

KENNEDY PARK

Tuesday, September 11
Spousal Support Group
3:00 p.m. - 4:00 p.m.

Tuesday, September 18
**Coping with Caring Topic:
Understanding Hospice**
4:30 p.m. - 5:30 p.m.

Wednesday, September 26
General Support Group
11:30 a.m. - 12:30 p.m.

DOROTHY'S PLACE

Wednesday, September 5
Spousal Support Group
9:30 a.m. - 10:30 a.m.

Thursday, September 13
**Coping with Caring Topic:
Understanding Hospice**
4:30 p.m. - 5:30 p.m.

Thursday, September 20
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.

CareLines is partially supported by the Aging Commission of the Mid-South.

Prisoners of Compassion

Caregivers, by the very nature of the tasks they face daily, truly suffer with those for whom they care. The bonds may be those of voluntary love, for love is always costly: it demands expression. On the other hand, they may be the bonds of obligatory responsibility. The caregiver is stuck with these duties because no one else is prepared or willing to help. In either case, one can become a prisoner of compassion. The vital difference is one of perspective.

Caregivers should look at how they view themselves. A caregiver's self image is crucial when it comes to the power to cope. Your outlook can make you bitter or better. Caregivers tend to look on their lives as either a gift or an entitlement. If they look on their lives as an entitlement, something due them just because they were born, then every difficult situation, accident, disease, physical or emotional setback is seen as an unwelcome and undeserved intrusion on their much deserved happiness. Such people typically become critical, cynical and bitter. They tend to blame G-d, the physicians, even the person for whom they care, for their own fate. They view their lives as fundamentally unfair.

On the other hand, there are those who look at life as a gift, something so splendid and undeserved that every breath is a blessing and every hour an honor. Such people may begin each day as a caregiver friend who prays at each day's beginning: "Good morning, dear G-d. This is your day, I am your child, have your own way." People with that kind of outlook tend to reach out naturally to others less fortunate, thankful that they can do so.

Our task is not easy, but it is needful. We are at our best when we begin each day with gratitude, offering thanks for yet another day in which to receive and offer love. It isn't always easy; it is always necessary if we - and those we care for - are to become better and not bitter.

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ALZHEIMER'S: When to Stop Driving

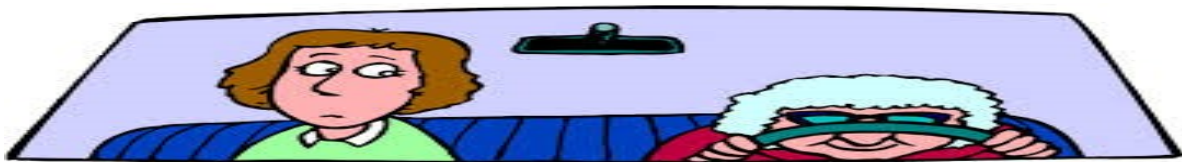
Driving is a powerful symbol of competence and independence, besides being a routine part of adult life. But the focused concentration and quick reaction time needed for safe driving tends to decline with age. Alzheimer's disease accelerates this process dramatically. If you're caring for a loved one living with Alzheimer's, you may need to modify his or her driving - or stop his or her driving completely.

More than memory problems

Dimmed short-term memory makes it easy for a driver who has Alzheimer's to get lost, even in familiar surroundings. Perhaps more dangerous, however, is a decline in the ability to judge distances and predict upcoming traffic problems. A driver who has Alzheimer's may also have trouble prioritizing visual cues. An irrelevant sight, such as a dog jumping behind a fence, may distract the driver from important cues — such as brake lights or traffic signs.

When to stop driving

Driving concerns often surface during the early stages of memory changes. People with dementia are especially likely to minimize the complexity of driving and overestimate their abilities. Opinions vary on whether driving should be allowed at all after an Alzheimer's diagnosis. Research indicates that drivers with Alzheimer's disease are more likely to get into motor vehicle accidents. For some people, it may be easier to give up the wheel early on, when they can still grasp the potential hazards. On the other hand, people in the early stages of the disease may be able to safely limit their driving to short daytime trips in familiar surroundings.



If your loved one continues to drive, pay attention to warning signs of unsafe driving, such as:

- ◆ Difficulty navigating to familiar places
- ◆ Inappropriate lane changing
- ◆ Confusing the brake and gas pedals
- ◆ Failing to observe traffic signals
- ◆ Making slow or poor decisions
- ◆ Hitting the curb while driving

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(continued from page 2) *Alzheimer's: When to Stop Driving*

How to ease the transition

When your loved one stops driving, arrange for alternative transportation. Perhaps family members and friends can run errands with your loved one, or you can arrange transportation through a senior van route. You may be able to establish a payment account with a taxi service or uber so that your loved one can go places, but won't have to handle money.

Also consider ways to limit your loved one's need to drive. Many items — such as groceries, meals and prescriptions — can be delivered to your loved one's home. Some barbers and hairdressers make house calls as well.

Remain firm as the disease progresses

If your loved one wants to continue driving despite the hazards — or begins driving again after a period off the road — consider these strategies to keep him or her out of the driver's seat:

Get it in writing. Sometimes it helps if an authority figure — physician, lawyer or insurance agent — tells your loved one to stop driving. Having something in writing can be a useful reminder.

Keep keys out of sight. Park the vehicle around the corner or in a closed garage, and don't keep keys in plain sight. If your loved one insists on carrying a set of keys, offer old keys that won't start the vehicle.

Disable the vehicle. Remove a battery cable to prevent the car from starting, or ask a mechanic to install a "kill switch" that must be engaged before the car will start.

Sell the vehicle. If you can make do without your loved one's vehicle, consider selling it.

Whether your loved one stops driving all at once or in stages, he or she will probably grieve the loss of independence. Be as patient as you can, but remember to stand firm. The consequences of unsafe driving can be devastating.

Adapted from www.mayoclinic.org July 2013 by Mayo Clinic Staff

Documents to Take with You When Traveling

- ◆ Doctors' names and contact information
- ◆ A list of current medications and dosages
- ◆ A list of food or drug allergies
- ◆ Copies of legal papers (living will, advanced directives, power of attorney, etc.)
- ◆ Names and contact information of friends and family members to call in case of an emergency



Adapted from www.alz.org

Say Goodbye to Caregiver Guilt



The daily stress a caregiver endures can be devastating, especially if you're considered to be the primary caregiver in the family and have limited time due to your job and/or other family responsibilities. The most common feeling "primary" family caregivers have toward aging loved ones is guilt. Guilt can be destructive, making one feel tired, weak and immobile.

No matter how much you already do, there are most likely times when you tell yourself that you could do better. Accept these feelings of guilt. Without recognition, guilt can be a destructive force. Know where these feelings come from and be aware that you are not alone in having such thoughts. The following tips will guide you on your way to saying goodbye to caregiver guilt.

Acknowledge your feelings. Negative feelings can make us feel uneasy and agitated, but it's important to understand that feelings of anger and resentment are not uncommon if you're a caregiver. Unless these feelings control us, and our behavior toward our family members, we must learn to accept them.

Think quality, not quantity. If you're feeling guilty that you aren't spending enough time with your aging loved one, think of how you can improve the quality of your time together. Spending time reminiscing with your mother or playing a game of checkers with your father, for example, may mean more to them than cleaning their kitchen or delivering a pot roast.

Establish priorities. While no one has the time or energy to do everything for everybody, you must find time (and energy) to do the things that are most important to you. By establishing priorities – and allowing some flexibility for the unexpected – you can help ensure that the most important needs are met and the most important tasks get done.

Set limits. If your loved one's constant demands are running you ragged decide – and clearly acknowledge – what you're able and willing to do for them. By setting limits and standing behind them, you can help reduce the guilt trips that come when you can't meet their every demand.

Redefine your concept of caring. If you find it difficult to provide loving, 'hands-on' care for your parent, don't feel guilty – simply think of other tangible ways you can help in providing for his or her care. Perhaps you're more comfortable chipping in to pay for an outside caregiver or planting flowers so your aging loved ones can see them from their bedrooms. We all 'give care' differently – add value where you can make a difference.

Act from love, not from a sense of debt. If you think of caring for an aging loved one as repayment for all she or he has done for you, you'll always end up in the red. Instead, think of caregiving as one person helping another out of love.

Forgive and seek forgiveness. If your parent was unkind or uncaring when you were a child, now is the time to forgive – even if you truly feel he or she doesn't deserve it. Holding grudges will not only affect your ability to care for your parent, but it will also hurt you.

Foster their independence. Don't feel guilty for not doing things for your loved ones that they could be doing for themselves. Instead, look for ways to help them do what they can. Something as simple as a \$1.29 pill dispenser can help your parent become more independent – and can free up precious time for you.

Face the facts. Despite how much you want to help, sometimes your aging relative needs round-the-clock care and constant supervision that you can't provide. When that happens, acknowledge that someone (or some place) may be better equipped to provide the majority of your parent's care than you are.

Don't succumb to peer pressure. Acknowledge, but don't be unduly influenced by, the advice you get from friends and coworkers. Do what your heart tells you is best and what your circumstances permit.

Source: www.alexisabramson.com by Alexis Abramson January 2013

ADS WISH LIST

Critical Items We Need Now!

- **Paper Towels
- **Liquid Antibacterial Hand Soap
- **Wet Wipes
- **Copy Paper
- **Facial Tissues
- **Toilet Paper



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.)

Understanding Hospice

*Presented by a panel
of representatives from Hospice agencies*

**Dorothy's Place 3185 Hickory Hill Rd.
Thursday, September 13, 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, September 18, 2018, 4:30-5:30**

Tips for the Month of September

- If your loved one wears dentures, you will have to monitor their care. You may also have to monitor their location when not in her mouth. Some dementia patients misplace them, throw them out, or flush them down the toilet.
- It is natural for you to be experiencing some feelings of grief when you are daily observing progressive dementia in someone you love. Allowing yourself to acknowledge and feel this emotion is healthy. It isn't good to suppress it. You may want to discuss what you are feeling with other caregivers, your clergy, a close family member, or a professional counselor.
- Even if you plan to always care for your loved one at home, it is wise to learn about the nursing homes in your community. You never know exactly what the future will bring. Investigating and creating a contingency plan while you are not in a crisis situation makes good sense. Just getting on a waiting list does not in any way commit you. Without advance planning your choices could be limited.
- Even if your loved one hasn't shown a tendency to wander or get lost, it's a good idea to keep a recent close-up photo and a full-length photo of him on hand.
- A caregiver told of how her relative found lemon oil in the cleaning closet. She poured it on food thinking it was salad dressing. Don't assume because something is not in the kitchen, that it won't make it's way there!
- Accompany your words with hand motions. When you ask your loved one to join you in an activity, motion with your hands at the same time.
- In older people dry skin is more apt to be a problem than oily skin. After bathing, pat the skin dry rather than rubbing. Avoid the use of body powders. For obvious safety reasons don't use bath oil in the tub or shower.

Adapted from: Lyn Roche, *Coping with Caring*, Elder Books, 1996

Help From Family and Friends

Study the list of family and friends you identified as a beginning caregiver, give specific suggestions to anyone who offers help, and accept all the help you are offered. If something offered isn't anything you can use, make an alternate suggestion.

Asking Your Family for Help. Beginning caregivers are encouraged to hold **family meetings** to ask for help from immediate family and extended family members.

If you and your care receiver live in one place while most of your family members live in other states, your only family support may be telephone calls, cards, e-mails, and occasional visits. Let relatives know how much these mean and keep them informed of changes in the situation you are facing with your care receiver. If they are planning to visit, make certain that you aren't expected to cook for them and entertain them as in the past.

Keep thinking of specific ways relatives can help you while they are visiting and throughout the year. Ask again as your caregiving responsibilities increase. Sometimes relatives will come stay with your care receiver for a week so that you can have time off for a trip to visit your sister, a vacation, or a convention for an organization important to you. If no one offers, it is reasonable to ask someone in your extended family for specific help such as a respite visit to give you a break from caregiving.

Caregiving can be expensive. You and your care receiver may find yourselves paying for home modifications, services, and medical supplies not covered by insurance or a government-funded program. Sometimes relatives who are not close geographically want to do something but don't know what to do unless you give them specific ideas.

If you hesitate to ask your extended family for financial support, suggest some gifts to save you not only money but also time and strength. For instance, they could give you frozen meals, caregiving books, lawn services, bus passes, and prepaid drug store gift certificates. Some of these can be ordered online or purchased in their state and mailed to you.

Speaking Up. As a caregiver, there will be many times, with professionals as well as with relatives and friends, when you need to **speak up for yourself and for your care receiver.** This is not easy for many caregivers, who may choose not to make the effort. We believe that the effort is worth it. In many neighborhoods today, residents don't visit each other - at the most, they may just wave or say hello. One caregiver told us that all she received from her neighbors was unwanted advice about what decisions they thought she should have made. She added sadly, "Of course, they haven't walked in my shoes." While there is always the chance that one of your neighbors will be insensitive, we believe it is worth the risk to talk to your neighbors about your caregiving needs and how they can help. This could be especially important if you do not have friends or family living nearby.

Caregivers hesitate to ask neighbors for help, thinking that they would be imposing if the neighbors did not offer first; but **most neighbors will not realize that their help is needed unless they are asked.**

Try requests like these:

"I miss my wife's cooking now that she is ill. I'm struggling just to heat frozen dinners, and I know you're a good cook. Could you help me learn to cook a few simple meals or bring us some home cooking once in a while? It would be such a relief to me, and I could pay for the ingredients."

"I know you and Dad used to see each other when walking your dogs. Dad can't walk Toby now, and I wonder if you might stop by and offer to walk him once a week? I'll give him a walk when I'm in town most Saturdays, so midweek would be good."

"You probably heard that my husband is sick. Sometimes I can't leave him to go grocery shopping, and I need someone to go to the store for us or stay with John while I go. May I put your telephone number on my list to call in an emergency?"



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Help From Family and Friends

You may be surprised to find people willing to do even more than you ask of them once they are alerted to your needs. Also, if your care receiver has a condition that causes wandering, the neighborhood will be alert to help guide him or her home.

If you feel that you just cannot bring yourself to ask people for help if they didn't offer first, at least write down the telephone numbers of the friends or neighbors who did offer to do something and list what they offered.

Now is not the time to say, "No thanks, we can manage." Accept their meals, visits, shopping, and lawn mowing, or suggest other ways they can help.

Finding Ways to Take Breaks. A break from caregiving is called respite care. Encourage friends and neighbors to visit your care receiver for a few hours at a time, sometimes when you are there, but mostly as respite care so that you can get away. In addition to being able to take care of chores like grocery shopping, you need time away from the care receiver to go to the doctor and hair salon, attend caregiver support groups and workshops, and do other nice things for yourself. This could be a drive to the park or a visit to a library, art museum, or day spa. If there are times of the day such as your care receiver's bath time when you do not want visitors, let your friends and neighbors know that. Perhaps one person can stay with your care receiver while another takes you out for a meal and concert. This gives you a chance to maintain a friendship while taking a break from caregiving. It's also nice for you and your care receiver when a relative, friend, or neighbor takes your care receiver on an outing without you.

It is vital for you to find ways to take regular breaks from caregiving and to stay in touch with the world outside your home. Some caregivers have found relief by actually volunteering for a local charity just to get out in the world and have a change of pace.

Adapted from: www.agingcarefl.org/caregiver/fourstages



Activities for September



(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, September 11, 1:30

Entertainment with Earl Randle, courtesy of Creative Aging, Friday, September 14, 2:00

Pet Therapy with Mid-South Pet Therapy, Thursday, September 27 at 10:00

Music Entertainment with Brenda Buford-Shaw, Friday morning, September 28

Kennedy Park Activities

Music Therapy with Rebecca, Tuesdays at 2:00

Pet Therapy with Bunni and Megan, Wednesdays at 9:30

Spanish Language Arts Therapy with Brigitte, Thursdays at 10:00

Art Therapy with Kerry from Dixon, Tuesday, September 11, 10:00

Entertainment with Jewel Jones & Band, courtesy of Creative Aging, Friday, September 14, 2:30

Music Entertainment with Brenda Buford-Shaw, Thursday morning, September 27

We're looking forward to a fun Spirit Week in mid-September. The schedule to dress up, for both centers is:

Monday, September 10 -- Pajama Day

Tuesday, September 11 -- Hat Day

Wednesday, September 12 -- Sports Day; dress in favorite team apparel

Thursday, September 13 -- Favorite Color Day

Friday, September 14 -- dress in Sunday Best for our Homecoming, with live entertainment courtesy of Creative Aging.


Important Dates to Remember


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

Dementia Sensitivity Experience
 presented by



Alzheimer’s & Dementia Services of Memphis, Inc.

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.

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



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

(If your loved one is enrolled at an ADS center, please inform Adina if an additional day of care is needed at Dorothy’s Place or Kennedy Park on the day of the conference.)

Sponsors to date include:

*The Bradley Law Firm, Memphis Funeral Home
 Compassus, Delta Medical Center, Silver Angels*

Meet other Caregivers!

Free Continental Breakfast and Lunch!

Informative Sessions!

To register, please go to: Caregiver Conference 2018
 on our website, adsmemphis.org
 or call Adina at 901-372-4585,
 or email, asamberg@adsmemphis.org

Lots of Helpful Resources!

