



# Teamwork

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## Interfaith CarePartners®

### Dramatic Changes in U.S. Aging and Caregiving Statistics

The U.S. Census Bureau recently published a report on older adults and caregiving activities. In July 2003, there were nearly 36 million people aged 65 and older in the U.S., with population projected to double by 2030.

The report discusses the impact of Alzheimer's disease, citing that more than seven of ten people with the disease live

at home and 75 percent of them receive care from family caregivers. The economic effect of the disease is estimated at \$80—\$100 billion annually due to health care expenses and lost wages of patients and their caregivers.

Care Team® ministry can help families faced with the reality of caring for a loved one with dementia. The statistics cited

above do not reflect more recent data or current changes in the U.S. and global economies. The cost of caring for a patient has almost doubled since 2003. Care Team® members can provide much needed home care to these families reducing the cost and giving caregivers much needed respite so that they can continue caring for their loved ones at home.

If your congregation does not provide in-home respite and support to caregivers, you may wish to consider adding this ministry. Speak to your coordinator about how you can start a Second Family Team®.

For more information on the statistics, please go to:

[www.Census.gov/prod/2006pubs/p23-209.pdf](http://www.Census.gov/prod/2006pubs/p23-209.pdf)

### Cell Phones Still Needed

Interfaith CarePartners® is collecting broken, working, dead or used cell phones for the National Interfaith Coalition on Aging. You may be able to place an announce-

ment in your congregation's newsletter and ask members to donate used phones. Some congregations have placed a box for the phones. Bring old cell phones, to your

next Team meeting and give them to your coordinator.



## Healthy Aging

September is Healthy Aging Month. You and your care partner may consider the following tips garnered from senior citizens who were asked to share advice on aging.

### Physical Fitness:

- Eat fruits and vegetables, not just favorites.
- Choose exercise that you and your care partner like

and will stick to. If able, go for a walk, swim, bicycle,



dance, fish, take the stairs instead of an elevator.

### Social Well Being:

- If your care partner is unable to actually travel for whatever reason, help them plan a trip anyway. Do research, look at photos, go to Internet sites which tell about the culture and cuisine of the country you are researching. More importantly, have fun and learn all at the same time.

## Helping the Primary Caregiver

Care Team® members can have a positive impact on those caring for their loved ones. How can team members help? There are three basic things you can do; it involves encouragement, relief and validation.

*Encouragement:* This can be shown through regular personal contact.

Make the person feel special and encourage him or her to ask what they need from you.

*Relief:* Sitting or caring for a loved one while they take time for themselves. This is particularly true if your team is an Alzheimer's Care Team® Gathering Place. Extending the relationship

to their home is another way of providing relief and care.

*Validation:* Let the caregiver know they are doing the right thing. Support them without being judgmental. Use "generous listening" skills and allow them to ventilate their feelings.

## Setting Boundaries With Care Partners

Make every effort to affirm the autonomy and independence of care partners, and enable them to retain control over their day-to-day decisions and activities. Care Team® members have an important role to play in strengthening care partners' abilities to remain independent as long as possible. However, there are limits.

- Be consistent. Don't waffle when a boundary has been set.
- Be prepared to be tested. Some care partners, not all, will test

you to see how far they can push. Do not let them.

- Mark out your space. Be straightforward and do not feel uncomfortable when you set boundaries, or when a care partner initially is upset by this action or actions.
- Follow through.
- Set boundaries when it is necessary, not before.

- Be very clear, without anger and with as few words as possible. Wordiness implies you are unsure.
- Be prepared for anger, whining or even a cold shoulder from your care partner when boundaries are set.
- Remember, you negotiate with your care partner, do not demand; keep a sense of self-esteem for you and your care partner.