

Self-care for the caregiver

Many caregivers' devotion to the care of their relative with dependence sometimes leads to excessive risky situations that would harm their welfare and success in the cares. These situations and risks typically materialize in:

- Assuming an excessive load of tasks and responsibilities, above their capabilities.
- Not using all the help available.
- Making actions and decisions that will work against your health and wellness.
- Not performing actions for their health and welfare, especially regarding disease prevention.
- Neglecting actions and strategies to adopt in the medium and long term.
- Subtracting resting time off to take care of the needs of our relative.
- Neglecting diet.
- Not exercising.
- Neglecting and downplaying health problems we may have.

The cares we provide to ourselves are as important as the cares that our relative needs. In fact, as we have been repeating in this Guide, take care of ourselves is the best way to be prepared and get and improve our ability to properly care for the needs of our relative.

- Taking care of ourselves is taking better care of our relative.
- The greatest value and support that our relative with dependence has are their caregivers.
- Nobody knows better than us how we feel and what happens to us. So, therefore, we are the main agent of our care.
- But we cannot do it alone. Taking care of ourselves means accepting all the help we have available.
- Delegating tasks and responsibilities in the care for our relative will help us. Besides, it also allows other relatives and friends to feel the protagonists of caring for a loved one.
- If we care for our relative because we love him/her, let's beware that we should also love ourselves.
- We have our limitations. Knowing and assuming them will get away about bad moments and frustrations.
- Sometimes you have to set limits to the care that you provide.
- Disease prevention and health promotion are very important weapons.

Selfcare will allow us to:

- Find ourselves in better physical and mental willingness to perform caring tasks.
- Have strength and capacity to address the several problems that taking care for a relative.
- Perform physical and emotional efforts that would be needed during some tasks.
- Have a sense of control of our lives and everyday reality.
- Have high decisive skills.
- Maintaining a state of serenity and well-being at all times.

However, you may find many barriers to care for ourselves. One of the main obstacles will be erroneous beliefs or thoughts.

These are some of the wrong thoughts that may arise during the care regarding taking care of ourselves:

- It is selfish to take care of myself and meet my needs.
- It is not necessary to ask for help. I can with everything.
- I am solely responsible for the welfare of my relative with dependence.
- If I do not do the tasks that must be done, no one will do them.
- No one cares for my relative as well as me.

These thoughts are wrong and inappropriate for the following reasons:

- It is not selfish to take care of oneself. Taking care also means to take better care for our relative and not compromise our future with problematic consequences that will involve caregivers' own tasks.
- The main caregiver does not have to face alone all the problems that will appear as a result of care to the relative. Nobody is a superman or superwoman and all the help that we can seize only will bring benefits for all the concerned people in the context of care.
- An excessive burden of responsibility is neither healthy nor acceptable in the long term. Distribute responsibilities on all aspects of caring for a relative is necessary and positive.
- For sure, the welfare of the relative with dependence will matter to a lot of people. Most probably, these people will be happy to help with the cares and welfare and also would like to feel protagonists of their relative's welfare.

Evaluate our thoughts and beliefs and confront them with reality can be a good tool to check whether we are in the best position to address the cares of our relative and ourselves.

Asking for help

Any assistance the caregiver can receive is necessary. Whether it is help in the cares targeted to support our relative as to support the caregivers themselves, both have enormous value and are an essential element for achieving successful caring situations. There are multitude of sources and resources to obtain help and support, either professionally and informal.

The most common assistances which we can access are:

- Help from family or friends.
- Professional aid aimed at taking care of our relative that alleviates our load.
- Professional assistance specifically aimed at supporting caregivers and their needs.
- Technical aids and home adaptations.
- New technologies and automation.

The benefits that are derived of accepting and seeking help and support are very high for the caregiver and his relative. To the obvious release of the burden of care, it is joined the distribution of care responsibilities, something that perhaps family and friends will thank, because they are also interested in the state and welfare of the relative.

Professional help, meanwhile, ensures quality care and attention, making sure our relative needs are being met through actions and interventions indicated for the specific condition that the person presents in a situation of dependency and their particular needs.

When we speak especially of the help of family and friends it is not uncommon that many caregivers reject them. The causes are several, as we have seen. These are some of the reasons for rejecting or not take advantage of assistance which we can access:

- We do not want to shift the burden of caring to other people
- We believe that no one will look after our relative as well and with the same dedication as we do.
- We feel that asking for and accepting help is a sign of weakness that we do not want to show.

It is important to contrast these thoughts and opinions with the real needs that our relative with dependence and us, the caregivers, present.

When asking for help, we recommend following these tips and taking into account the following aspects:

- Clearly express our needs to the person we ask for help.
- Remember that, except in services that rightfully correspond and the associations that are obliged to lend support, nobody is obliged to provide it. Accept a no naturally, since it is a possibility.
- We must use our communication skills when asking for help: empathizing with the person that we are requesting it, showing no inhibition or insecurity, clearly explaining what we want from that person and why we want it, etc.
- When facing a negative response, not insisting again asking for help.
- Remembering that request is not to require.
- Getting help does not mean that we are indebted to the person who supports us.
- When we agreed that someone will help us clearly define the content of such aid: degree of involvement, time spent and what responsibilities they will accept.

Optimizing the aids that we have will allow us to make good use of them and extract the best of this new situation:

- We should identify what our relative can do for himself/herself. Depending on the degree of dependence he or she can perform some tasks without need our support. Besides, maintaining and enhancing their autonomy is one of our main duties as caregivers.
- In the care plan we can identify when and who would help us performing tasks in isolation. In the evaluation and re-elaboration of the plan we can adjust it to get the help that we get.
- Depending on the degree of dependence on the relative and their particular difficulties, there are available public aids involving a right that we can and must practice. Research about them.
- The catalogue of private services for dependence is really high. Look up more information to find what of them suit your needs and possibilities.
- Organizations of caregivers, dependent persons or affected are one of the highest values and help resources. Contact them.
- Do not forget that there are many caregivers of dependent people in Spain. They can be helpful to share experiences and knowledge, to vent our emotions, etc.
- Your relatives and friends will certainly want to help. Do not hesitate to express their feelings and needs with them.
- There are many products that can provide support to make easier the caring tasks. They can be purchased or request for free transfer. Research about them.

The Depression

Depression is a problem that affects a large part of caregivers.

According to the definition we can be found in the Wikipedia:

Depression is a mental illness that involves a disorder of mood. His usual symptom is a state of despondency and unhappiness that can be transient or permanent.

The medical term refers to a syndrome or set of symptoms that affect mainly the affective sphere: pathological sadness, decay, irritability or a mood disorder that can decrease work performance or limit usual, regardless of whether their cause is known or unknown vital activity. Although that is the core of symptoms, depression can also be expressed conditions through cognitive, volitional or even somatic type. The person suffering from Depression cannot only experiencing sadness, but loss of interest and inability to enjoy the usual recreational activities, as well as less motivation and a little slower experience of over time.

Being it a disease, solving and facing an episode or a permanent state of depression should be treated by the right professionals: therapists, psychologists and psychiatrics.

The consequences of an episode or depressive state for caregivers are especially important for our own health and the care that we provide. If we endure a depressive state:

- We will be in a worse position to properly care for our relative.
- We will not be able to find time or moments of enjoyment.
- We will have a misperception about ourselves as individuals and as caregivers.
- Our state of physical and social health will be adversely affected.
- We will be in a worse position to assess situations and take decisions.
- We will tend to leave our own care.

The best preventive strategy that we can carry out facing depression is to be aware that these problems may appear and we need to be alert for a possible presence of the following symptoms:

- Intense and prolonged fatigue.
- Changes in our sleep patterns: from sleeping a few hours to many hours.
- Loss or gain weight by changing eating habits.
- Lack of motivation and interest in activities.
- Lack of motivation and interest to maintain social relationships.
- Anxiety and concern for the future.
- Anticipating recurring problems that have not yet happened.
- Low self-esteem.
- Abandonment of oneself: especially image and hygiene.
- Negative valuing everything we do.
- Frequent crying for no apparent reason.
- Thoughts and wishes to die or commit suicide.

It is necessary to highlight that depression has a simple and effective treatment in most of the cases. Before the first symptoms, it is advisable to alert our general practitioner so that we will be derived to the right specialists or seeking psychological and psychiatric support, because there are many private professionals.

Acting promptly is one of our best weapons when facing depression. If instead we do not act early, time plays against the solution of the problem, requiring longer treatment and enabling the depression to become chronic.

A positive attitude and the willingness to change our way of thinking and attitudes is an essential part of the treatment and recovery of a depression problem. Therefore, we should follow these tips will be useful during recovery:

- Respecting and loving ourselves. Just treating ourselves as we treat those that we love.
- All the support that we receive is important. Don't close up to the assistance that family and friends will provide.
- Exercise is essential. Maintaining regular physical activity will help in overcoming negative attitudes.
- Resting time, away from the burden of care is very important. Either a few hours a day or once or twice a year going on holidays, research the resting services that you can access.

- Streamlining negative thoughts and feelings. Taking care of the reality of the situation, ask yourself if those thoughts and feelings are proportioned.
- Set realistic goals for us and for our cares. Setting unachievable goals will cause feelings of frustration.
- Taking care for the time devoted to rest and to ourselves. It is as important as caring for our relative.
- Do not abandon our health and our appearance. This will lead us to feel better and easier for us to adopt a positive attitude.
- Be active. Inactivity leads to more inactivity. Furthermore, the more active we are the less we will deal with counter-productive thoughts in our minds.

Isolation

Another problem that commonly affects caregivers is the lack of social contact and isolation.

The reasons for this may seem obvious: the time we require us to care takes out time to spend with family and friends and leave our homes; the tiredness that taking care produces us lead us to stay at home in our spare time; the concerns can take away the desire to leave our homes and socialize, etc.

However it is often that there are other reasons why caregivers isolate that have to do with the erroneous thoughts:

- We feel guilty for enjoying social relations
- We feel guilt for not being taking care of our family if we are by relating with friends.
- We not want to be a concern or a bother to our friends and family telling our problems.

Isolation, whether caused by a glaring lack of time or for an aware decision derived of inappropriate thoughts, it deprives us of one of the essential needs for everyone: the company of others and enjoying friendships. Similarly, in our condition of caregivers is the moment that we need the most support of others and the gratification of the company and social affections.

Social relations are essential to maintain a sufficient level of welfare, to achieve good health, to enjoy and take advantage of the free time, to develop as people and to give and receive affection.

We can identify that we socialize less than what we want or below our degree of need if we experience these thoughts:

- I look forward to spending time with family and friends but I do not want to leave my house for it.
- It's been longer than usual without seeing my family and friends.
- Going out and enjoying social relationships generates feelings of guilt me.
- I do not want to meet people because they do not have to listen to my problems.

Considering the difficulties faced by caregivers to interact socially insofar as they did before taking this role, the decline in frequency of social activities is not a fact that the caregiver should feel guilty about. On the contrary, you should be aware of how necessary are these and the isolation is a generator of problems and difficulties that little help even though we are best caregivers.

It is the caregiver himself whom must be aware of how necessary they are relationships social. If you cannot socialize all that you would like or, if you socialize less than before becoming a caregiver, think and remember how rewarding it was to participate in social relations when you fully enjoyed.

Faced with a clear lack of time to connect in the way we did before becoming caregivers, but understanding the need to relate socially, it is advisable to optimize the time devoted to social relations.

A good way to optimize relationships is to focus especially on those that there are more satisfactory.

The good social relationships are characterized by:

- Providing fun and entertainment.
- Involving people who understand and empathize with us and our situation.
- Providing a support channel and emotional release.
- Signifying relief from the burden of care.
- Promoting our emotional well-being.
- Allowing us to give and receive affection.

When the deficit in our relations is caused by erroneous thoughts like we have listed or simply because we do not relate our mood is low and this implies an effort, we must remember:

- Social health is an essential part of our health. We can not have an state of good health if we neglect the social part.
- Caring for ourselves means taking better care of our family. Successfully interact socially is one of the best props for our own care.

Also, remember that when establishing and developing the Care Plan is convenient optimize the frequency and timing of the tasks of caring for the same plan, reflect the times in which we can make use of free time we can devote to being with company.

Anxiety

Excessive burden of care, lack of support, the common problems encountered with care and other elements present in the caregiver's life can lead them to frequently suffer high anxiety states.

Anxiety can play in our favor, when it makes it possible to react to an event or to a need and act appropriately and effectively. However, if the anxious states last long, or if they appear without any external event that has awakened, we may be talking of suffering from anxiety disorders.

Anxiety can generate in the caregivers:

- Serious health problems
- Difficulty to carry out with our tasks
- Permanent emotional discomfort
- Making poor decisions
- Compulsive behaviors
- Chronic fatigue
- Depression

As always, the best way to deal with the appearance of prolonged states of anxiety or anxiety disorders is to act promptly. It is therefore advisable to be attentive to the following symptoms of these situations:

- Appearance of unfounded fears.
- Emergence of excessive worries.
- We are very tense and nervous.
- We feel anxiety and impatience.
- We are not able to relax.
- We are very tired.
- We have palpitations.
- Frequent headaches.
- Suffocation.
- Nausea
- Weakness.
- Irritability.

Anxiety problems are very common nowadays and have a treatment simple. We should consult the doctor before the onset of symptoms that we indicate the treatment to follow or we refer you to a specialist.

Meanwhile, a positive attitude to our anxious state will be one of our best allies to overcome this problem.

The positive attitude when facing high anxiety or an anxiety disorder it implies:

- Not anticipate events, what has to happen will happen.
- Try to control reactions to distressing situations we concrete.

- Before acting, if we are anxious to distance ourselves from the situation it has generated the increase in anxiety.
- Breathe deeply.
- Apply relaxation techniques. Our doctor can teach these techniques.
- Do not be reluctant to express how we feel and look confident we listen.
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Manage stress

Caregivers tend to suffer high levels of stress. Stress is a condition very common today, and there are many effective ways to deal with it.

Stress is a physiological reaction by which the body responds in a certain way in a situation that is interpreted as threatening or requiring additional effort. Here, stress is necessary to act in situations everyday life. However, when stressed responses are constant and they give too much stress can have serious health consequences.

It is our subjective assessment of a stimulus that determines how we respond to it. Due to the overload suffered by many caregivers and difficulties they face daily, wrong valuations may appear before some or many situations, so that we cause excessively frequent responses stressed.

The consequences that stress has on caregivers are, among others:

- High anxiety.
- Aches and muscle tension.
- Hair loss.
- Diminished self-esteem.
- Changes in social relations
- Difficulty making decisions.
- Increased chance of illness and health problems.

Therefore, the first advice for coping with stress is to identify whether our response a situation is appropriate and consistent with reality. Similarly, it is advisable identify situations that cause us stress and we generate inappropriate responses.

In caregivers converge several factors that can negatively influence the degree of stress that the person has:

- ☒ If care is voluntary or not. If we have not had the opportunity to choose become caregivers, but has been imposed, stress tends to be higher.
- The degree of satisfaction with the way we conduct tasks: evaluation we do ourselves as caregivers. The more negative this is rating, the more likely we suffer stress.
- The type of relationship that we maintain with our family with dependence. If the relationship is not satisfactory, often increases stress. Also, our expectations about the relationship or what should be the behavior of our family play an important role.

- Our ability throughout our whole life to face situations stressful. If we handled before being caregivers bad stress generates, probably the same thing happen to situations generated by the cares.
- Our state of health. If our health is poor, the ability to successfully face the stress is low.
- The lack of support to care raises the objective and subjective burden of care and promotes the generation of stress.
- There are isolated and situations that stress us well above other situations.

As always, the best option to address self-care in relation to stress is to be watch for the appearance of the first symptoms. If we have a high stress we may suffer the following symptoms:

PHYSICAL:

- high tiredness
- Tightness in the chest
- Difficulty breathing
- Palpitations
- Frequent Sweats
- Difficulty swallowing
- Tremors

EMOTIONAL:

- Anguish and fear
- Frequent crying
- Frequent anger and irritability
- Mood swings
- Decreased cognitive abilities: the ability to concentrate, to
- Make decisions, stop properly assess situations, etc.
- Feelings of fear or panic unfounded
- Depression
- Feeling that surpass us care

BEHAVIORAL:

- Restlessness and hyperactivity
- Sleeping more than before or having difficulties to fall asleep
- Taking drugs without medical supervision
- Smoking or drinking more than usual
- Compulsive behaviors
- Overeating or under eating

To address and resolve a situation of high stress, it is essential to act as early as possible. If we have identified the symptoms of stress or if it has been us diagnosed, act to change things not

only involves heading towards an improvement, It allows us to take control of the situation, which has a positive impact on our perception of us as caregivers.

Tips to properly manage stress:

- Recognize the warning signs and symptoms. Go to the doctor before his appearance.
- Identify situations that cause us stress.
- Evaluate how we respond to these situations and measure the consistency of our response with reality.
- In all these situations that stress us identify what we can change and which not. We can only modify those that are or may be under our control. For those situations we cannot change, we must adapt to them. All this means a satisfying experience in terms of self-assessment and self-esteem.
- Addressing the changes one by one.
- Rest is very important. If breaks are not repairmen identify causes to modify. If this is not possible and not enjoyed relaxing repairman, go to a professional.
- Express how we feel is very important.
- Exercise helps reduce stress levels
- Avoid taking medication without medical supervision. Impulsive and attitudes
- Compulsive we generate even more stress.

Placing limits on care

The greater the demands and the burden of care, the more necessary it draw the line between properly care for a family member to provide care thereby compromising our health and our future.

Sometimes, caregivers begin to set limits on care when loading It is high and they have appeared some of the problems and negative consequences of care that we have seen: stress, emotional problems, health problems, isolation, etc.

It is therefore advisable to set limits to the care that we provide from the first currently evaluating our ability to withstand stress and burden that we expect, will involve care.

Putting these limits is an essential part of self-care. As a result, we will be better physical and emotional conditions to assume the duties and responsibilities necessary, so that the whole context of care is benefited: our family dependent, we caregivers and our family and social nucleus.

Many caregivers are excessively loaded voluntarily for love of the familiar, zeal in their work, or for other reasons. We do a favor to anyone under load excessive, but quite the opposite: our chances of getting sick and providing poorer quality care are enhanced.

At the same time we established set limits to care, it may happen that our relative makes us excessive demands. These demands are excessive when:

- The relative with dependence blames the caregiver for inadvertent errors
- The relative pretends to be worse than how he/she is
- He/she doesn't agree with our proposals to set limits
- Rejects aids (assistive devices, services) that facilitate care
- Refuses to provide money for those costs of care for himself
- Sometimes he/she mistreats the caregiver

Tips to put limits on care:

- Identify tasks that can make itself familiar
- Encourage autonomy it is to make the participant familiar with dependency and responsible for their own care
- Assess what tasks we cannot perform or cannot be done without aid
- For those tasks that cannot perform, you have to weigh: degree of importance, what alternatives there are to these tasks and who could carry them out.
- The answer to these questions must be reflected in the plan of care.
- Ask for help and support
- Maintain long-term decisions on limits

When we take care every day, we acquired habits, routines and skills that make us more bearable burden when at the beginning of our role as caregivers. At this point, you can re-evaluate our capacity efforts and assume responsibilities and reconfigure the limits that we have set previously to care.

Feelings of guilt

Feelings of guilt are common among caregivers, although each of them can appear for different reasons.

We may have feelings of guilt because:

- We believe we can give more than what we are giving
- We believe that our attentions to the more familiar you deserve loans
- When we dedicate ourselves time
- Because of decisions that we have adopted
- Wanting to escape the care and our role as caregivers
- What have reacted badly to a situation
- Because of arguments and conflicts that have happened to family care or familiar surroundings
- Because of neglecting other obligations to provide care to family
- Because our relative with dependence requires us too much

Emotional distress and other health problems are immediate consequences of the guilt. Energy expenditure focused on feelings of guilt experienced by a person with these feelings is very high. It is, indeed, a feeling very harmful and destructive that does not allow us to appreciate our quality and capabilities as caregivers, not allowed to see the improvement that can experience our family as result of our care and not allow us to feel satisfied with the work we are doing.

Tips to understand and deal with feelings of guilt:

- It is advisable to accept our feelings. It is common to experience guilt and accept with serenity is the first step to perform changes in situations that cause it.
- Accept the guilt serenely involves recognizing that is a feeling that it doesn't makes us well and can have an impact on our emotional state and psychological.
- It is advisable to identify why we feel guilty and to what situations. Sometimes the fault is only the bundle under found multitude of deeper feelings. Know is better known to ourselves and be more prepared to act on them.
- Pay attention to how express and experience their responsibilities with care. Pay attention how uses the words "should", "could do" "Should do", etc. perhaps our self-imposed too high.
- If certain situations or behaviors generate blame us, we must see if we can modify them. Modify implies determination to improve and we will grant a greater degree of control over these situations.
- Contrasting our ideal role of caregivers with the caregiver who we are and are capable of being. Perhaps our ideal is unattainable.
- Express how we feel is a balm for our emotional state. The family and friends are a good support.
- Be understanding with yourself is important. On many occasions we are but our judge.
- If we are unable to overcome feelings of guilt, we can go to a professional.