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Family Caregiver Resources

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Aging well in

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Avoiding burnout

For the sake of the person you care for, you need to catch stress before it becomes burnout. If you don't take breaks for yourself, your loved one will suffer. It's not selfish to avoid burnout. It's imperative!

Stress or burnout?



Most of us know it when we're stressed. We talk about it, and we talk about needing to do something about it ... when we have the time.

But we might not be aware when we reach the point of burnout. That's because going numb is the nature of burnout. To be so worn out that you are beyond caring.

Put simply, burnout is stress that has gone on too long. It is an

important distinction to understand. Burnout has more serious, long-term consequences for your physical health and for your emotional well-being.

Take a moment for self-reflection and assess yourself.

If you are stressed, you are

- **constantly on the go**, urgently trying to get things done.
- **emotionally brittle**, tending toward irritability and anxiety, feeling a bit scattered.
- **tired and not sleeping well**, rushing through leisure activities.

If you are a stressed family caregiver, you are scrambling to keep up with the demands of your role. But you believe that you eventually can get everything under control, and doing so feels important to you. Getting stress relief is a goal.

If you are burned out, you are

- **doing less and less** and still feeling exhausted.
- **emotionally hopeless**, feeling like nothing will ever change.
- **frequently physically ill**, catching every cold that comes around.
- **withdrawing from friends and activities** and often overconsuming food, alcohol, etc.



Maricela Fuentes
RN, CMC

Founder
ABC Care
Management

707.477.0700

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To put this in perspective, consider stress to be a blinking yellow light: Yield. Slow down. Find a way to weave in more breaks. Consider burnout to be a red light: Stop. You have given too much for too long. Change is needed immediately before burnout undermines your health and your ability to provide appropriate care for your loved one.



Preventing burnout



Burnout is more than stress. It's a risky condition.

The consequences of burnout include

- **emotional depletion**, often leading to depression
- **reduced resistance to common illnesses**
- **increased likelihood of a chronic disease**
- **lack of energy** to do what your relative needs

Some stress is inevitable when caring for a loved one. But unrelenting stress is bad for everyone. Think of a candle. If you leave it lit 24/7, it will quickly burn through. But if you let it rest between periods of use, it will last a long time. You are like that candle.

Use these strategies to avoid burnout:

- **Accept the realities.** Sometimes life is cruel and unfair. Acknowledge your grief. Acknowledge any frustration or resentment. At the same time, value the ways you skillfully address challenges.
- **Get help.** Develop a specific list of things others can do. Consider what tasks friends or family could take over. If there are no volunteers, hire help.
- **Give yourself time away.** You may need quiet time to replenish. Or conversation and social activity. Or both! Respite is essential. Aim for personal time on a regular basis. Even 15 minutes/day works wonders.
- **Care for your body.** Sleep! Eat nourishing foods. Find a physical activity you can do at home (hula hoop?). Keep up with dental and medical checkups.
- **Maintain other interests.** Don't forsake family, work, or hobbies. They bring meaning to life.
- **Cultivate gratitude.** Take a step back and reflect on the ways that caregiving has helped you grow

Take a break: Options for respite

Go to bed when you're ready, sleep without interruption, and do what you want all day. Ahhh... If you're providing full-time care for your loved one, you may long for a night to call your own. Better yet, a few days *and* nights of R&R.

An extended respite break isn't indulgent, it's smart. Providing care full-time is physically and emotionally demanding. Taking a break gives you time to replenish your personal resources so you can be the loving, patient, care provider you want to be.

Here are some options:

Your relative stays home. If you already have a hired caregiver, ask if he or she would provide some multi-day help. Or, make arrangements with a home care agency. Have the agency's care provider spend time at the house with you and your relative ahead of time. Easing in helps your loved one feel safer and lets the provider learn the routines.

You stay home. Typically, this means finding a facility that has beds available for short-term occupancy. Plan ahead to get the dates you want. Expect some paperwork and an assessment by the facility to fully understand your family member's needs.

- **Assisted living.** An assisted-living facility is an option if your loved one has only mild disability. A person capable of handling some independence may enjoy the social activities and communal meals.
- **Memory care.** If your relative has moderate or advanced dementia, then a specialized care unit with trained staff and closer supervision is more appropriate.
- **Skilled nursing facility.** If your loved one has medical needs (wound care, injections, IV medication, pain management), a rehab facility is the best match.

Most of these arrangements are private pay, unless you are on hospice. Check with the VA, fraternal organizations, or your Area Agency on Aging for available respite grants.

Contact us at **707.477.0700**

personally. Be sure to let those who are pitching in know how much their efforts mean to you.

- **Find community.** Identify at least one person you can comfortably talk with, perhaps a friend, rabbi, pastor, or therapist. Join a caregiver support group.
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