

Choosing Your Battles As a Caregiver

As my parents aged, I was the daughter who stepped up to have difficult conversations with them. I fancied myself a negotiations pro after years working in the communications industry. And while many of those discussions went well, I often struck out when making the smaller requests. My mother agreed to my hiring a home health aide to help her out, but she would never leave details in her phone messages no matter how many times I pleaded with her about it. Those “call me when you have a minute,” messages sent this busy, working mother over the edge. How could I prioritize the return call if I didn’t know if what she wanted to discuss was an emergency or merely neighborhood gossip? And while my father agreed to stop shoveling snow, he refused to wait for the home health aide to make the bed, even after he tripped over his bedsheets and injured his knee.

Oh, I spent so much energy arguing with parents about the small things! If only I had learned to pick my battles, I would have been a much less stressed out daughter. So how can you avoid the mistakes I made? What’s the secret to not sweating the small caregiving-related stuff? Read on for the lessons hindsight taught me.

Eldercare is not role reversal. As we start to worry about, and take on caregiving responsibilities for, our parents, we often think we are reversing roles with them. Since our frame of reference is that of child to adult, we think the next phase of life, as they become more dependent on us, is the same. But there is a big difference between a parent raising a child and an adult child caring for a parent - autonomy. No, we are not “parenting” our parents as caregivers; we are supporting them as they age. The role reversal paradigm infantilizes adults, dismisses their life experiences, and ultimately leads to frustration for all involved.



When I reflect on the battles I lost as an adult daughter, they were the battles that weren’t critical. My parents listened to me when it came to matters of life or death - medication management, safe driving, etc. – but they didn’t let me boss them around when it came to the more trivial things. Nor should they have because...

It’s their life; not yours. Assuming our parents are not experiencing any cognitive decline, we need to remember that as caregivers, we are assisting them in their lives – we are not taking over their lives. That means, if, like my father who wanted his bed made first thing every morning, your parent wants something done their way, they get to have it their way - - assuming, of course, they are not putting anyone in harm’s way. Does that mean we need to enable or accommodate our parent’s every request or decision? No. It means they get to choose how to live their lives and we get to choose how to respond. I had no right demanding my father stop making his bed. I had every right to choose how I responded if he tripped over the bed linens and was hurt again.

Compassion goes a long way. Eldercare is challenging; so is aging. So often we react to care-related situations through our own point of view. How can we not? We are juggling our own busy lives, while watching our parents decline, and we typically have too few support systems in place to aid us. It’s natural to wish our parents would just listen to us and trust we know best. Wouldn’t that make caregiving more efficient and less fraught with emotion? Unfortunately, family relationships don’t operate on a schedule and feelings are part of the package. When making requests of your aging parents, do try to understand their point of view. Are they grieving loss of independence? Are they scared, tired, or frustrated? If you invest in the time up front to understand how they are feeling, you will likely save time on frustration, miscommunication and resentment. A little compassion can go a long way.

Liz O'Donnell, [benefits.care.com](#)



RESOURCES

NC Stroke Association
336-713-5052
[ncstroke.org](#)

National Stroke Association
1-800-STROKES (787-6537)
[stroke.org](#)

American Diabetes Association
1-800-DIABETES (1-800-342-2383)
[diabetes.org](#)

The Foundation for Peripheral Neuropathy
877-883-9942
[www.foundationforpn.org](#)

National Kidney Foundation
1-800-622-9010
[kidney.org](#)

Arthritis Foundation
1-404-872-7100
[arthritis.org](#)

Parkinson’s Foundation
1-800-473-4636
[parkinson.org](#)

Anxiety & Depression Association of America
1-240-485-1001
[adaa.org](#)

National Alliance on Mental Illness (NAMI)
1-800-950-6264
[www.nami.org](#)

Caregiver Action Network
Online Instructional Videos for Caregivers
[caregiveraction.org](#)

Family Caregiver Alliance
Online information and resources for caregivers
[caregiver.org](#)

Family Caregiving
[aarp.org/caregiving/](#)



The **Seniors And Law Enforcement Together Council (S.A.L.T.)** meets quarterly. Meeting location rotates between the four Randolph Senior Adult centers (Asheboro, Archdale, Randleman and Liberty). Educational programs are presented on safety concerns and more.

Contact the Community Engagement Coordinator at Randolph Senior Adults at 336-625-3389 for more information on the next scheduled program.

The Nurturer



A Newsletter for Family Caregivers in Randolph County Issue 15 - Feb/Mar 2022



Pancake Day!

March 1 is National Pancake Day. Whether you call them hotcakes, griddle cakes, Johnnycakes, or flapjacks they are delicious!

Have fun with different flavors and syrups. Add chocolate chips to the batter, or fruit like blueberries and bananas. Even diabetics can enjoy pancakes with available gluten free varieties and sugar free syrup.

Let your imagination run wild! Have them for breakfast, lunch or dinner. Why not go out to eat at your favorite restaurant and make a day of it!

Free copies of *The Nurturer* can be picked up at all Randolph Senior Adult Association locations, Randolph Health, Regional Consolidated Services and other community sites. *The Nurturer* is also available online at [www.senioradults.org](#).

To receive free quarterly copies of *The Nurturer* in the mail or email, call 336-625-3389 or email: [rcsaa2@senioradults.org](#) to be added to our mailing list.

Follow Randolph Senior Adults Association On Facebook



Enabling family caregivers to develop their own box of self-care tools

Powerful Tools for Caregivers is a six-week educational program designed to help take care of you while you are caring for a parent, spouse, friend, or loved one. You will benefit from this class whether you are helping someone who lives at home, in a nursing home, or across the country.

The education program meets once a week for six weeks and covers the following topics:

- Week 1:** Taking Care of YOU
- Week 2:** Identifying and Reducing Personal Stress
- Week 3:** Communicating Feelings, Needs, and Concerns
- Week 4:** Communicating in Challenging Situations
- Week 5:** Learning from our Emotions
- Week 6:** Mastering Caregiving Decisions

Cost: This program is provided at no cost through **Family Caregiver Support Program** funds. Donations are always welcome to help defray the cost of The Caregiver Helpbook.

Class size is limited and social distancing will be observed. **Pre-registration is required.** Refreshments will be provided

Please contact Margie DiDona or Lisa Alley at 336-625-3389 or [rcsaa2@senioradults.org](#) for more information or to pre-register.

LOCATION	DATE	TIME
Randolph Senior Adults Association The Harry and Jeanette Weinberg Adult REC 347 W. Salisbury Street, Asheboro	Thursdays April 21 – May 26, 2022	10:00 – 11:30am

In-Home Respite Care by certified nursing assistants may be available so caregiver can attend this workshop. Call for more information.

Note: This program does not focus on specific diseases or hands-on caregiving instruction.

THIS WORKSHOP IS NOT INTENDED FOR PROFESSIONALS



RANDOLPH SENIOR ADULTS LOCATIONS

ASHEBORO—MAIN OFFICE
 The Harry and Jeanette Weinberg Adult Resource & Education Center
 347 W. Salisbury Street
 Asheboro, NC 27203
 336-625-3389 or 1-800-252-2899

ARCHDALE CENTER
 108 Park Drive
 Archdale, NC 27263
 336-431-1938

RANDLEMAN CENTER
 144 W. Academy Street
 Randleman, NC 27317
 336-498-4332

LIBERTY CENTER
 128 S. Fayetteville Street
 Liberty, NC 27298
 336-622-5844

ADULT DAY CARE
 714 Farr Street
 Asheboro, NC 27203
 336-629-3787

RCATS TRANSPORTATION
 347 W. Salisbury Street
 Asheboro, NC 27203
 Randolph County - 336-629-7433
 Montgomery County – 910-572-3430

Check Out Our Facebook Page



DOES YOUR LOVED ONE DRINK NUTRITIONAL SUPPLEMENTS?

As a caregiver, you may be eligible to receive one case each month of the nutritional supplement used by your care recipient.

For more information, contact
 Margie DiDona or Lisa Alley
 at Randolph Senior Adults Assn
 336-625-3389

Funds provided by the Family Caregiver Support Program

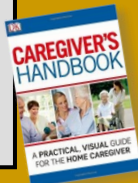


Free Caregiver Skills Class For Family Caregivers



Physical and Occupational Therapists will train **family** caregivers how to physically care for an older adult

- Transferring
- Personal Care
- Feeding
- Fall Prevention
- Medical Equipment Use



Each caregiver will receive a copy of the Caregiver's Handbook

Thursday, April 21, 2022
6:00pm – 8:00pm

Randolph Health StayWell Senior Care
809 Curry Drive, Asheboro

Refreshments will be provided

Participants need to register by April 14th, contact:
Margie DiDona or Lisa Alley
Randolph Senior Adults Association
336-625-3389

In-Home Respite Care by certified nursing assistants may be available so caregiver can attend this workshop. Call for more information.



Understanding Different Types of Dementia

As we age, it's normal to lose some neurons in the brain. People living with dementia, however, experience far greater loss. Many neurons stop working, lose connections with other brain cells, and eventually die. At first, symptoms can be mild, but they get worse over time. Read on to learn more about four different types of dementia.



TYPES OF DEMENTIA

Alzheimer's Disease	Frontotemporal Dementia	Lewy Body Dementia	Vascular Dementia
What Is Happening in the Brain?*			
Abnormal deposits of proteins form amyloid plaques and tau tangles throughout the brain.	Abnormal amounts or forms of tau and TDP-43 proteins accumulate inside neurons in the frontal and temporal lobes.	Abnormal deposits of the alpha-synuclein protein, called "Lewy bodies," affect the brain's chemical messengers.	Conditions, such as blood clots, disrupt blood flow in the brain.

*These changes are just one piece of a complex puzzle that scientists are studying to understand the underlying causes of these forms of dementia and others.

Symptoms

Mild <ul style="list-style-type: none"> Wandering and getting lost Repeating questions Moderate <ul style="list-style-type: none"> Problems recognizing friends and family Impulsive behavior Severe <ul style="list-style-type: none"> Cannot communicate 	Behavioral and Emotional <ul style="list-style-type: none"> Difficulty planning and organizing Impulsive behaviors Emotional flatness or excessive emotions Movement Problems <ul style="list-style-type: none"> Shaky hands Problems with balance and walking Language Problems <ul style="list-style-type: none"> Difficulty making or understanding speech 	Cognitive Decline <ul style="list-style-type: none"> Inability to concentrate, pay attention, or stay alert Disorganized or illogical ideas Movement Problems <ul style="list-style-type: none"> Muscle rigidity Loss of coordination Reduced facial expression Sleep Disorders <ul style="list-style-type: none"> Insomnia Excessive daytime sleepiness Visual Hallucinations	<ul style="list-style-type: none"> Forgetting current or past events Misplacing items Trouble following instructions or learning new information Hallucinations or delusions Poor judgment
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There are several types of frontotemporal disorders, and symptoms can vary by type.

Typical Age of Diagnosis

Mid 60s and above, with some cases in mid-30s to 60s	Between 45 and 64	50 or older	Over 65
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Diagnosis

Symptoms can be similar among different types of dementia, and some people have more than one form of dementia, which can make an accurate diagnosis difficult. Symptoms can also vary from person to person. Doctors may ask for a medical history, complete a physical exam, and order neurological and laboratory tests to help diagnose dementia.

Treatment

There is currently no cure for these types of dementia, but some treatments are available. Speak with your doctor to find out what might work best for you.

Living with dementia can be challenging, but there are ways to manage it. To learn more about these types of dementia and other conditions that can cause dementia, visit www.nia.nih.gov/health/what-is-dementia.



SITTERS LIST

Randolph Senior Adults maintains a list of sitters willing to sit, assist with personal care, homemaker chores, errands, etc. This is an option for someone needing in-home help and able to pay out-of-pocket. It is up to the individual or family to check references and conduct interviews.

A copy of the Sitters List can be mailed or e-mailed to you.

Please contact:
Margie DiDona or Lisa Alley
at 336-625-3389 or rcsaa2@senioradults.org

65+? Lonely? Need to talk?

NCBAM's Hope Line
is here for you!

866-578-4673

 NORTH CAROLINA BAPTIST AGING MINISTRY



Caring Sharing

Caregivers helping Caregivers is usually the best advice!

Shopping with someone who has dementia can be very challenging. As we shop, my mother puts many things in the cart, not realizing how much it may cost, or if she really needs it. Rather than argue with her, I take the unnecessary items out of the cart when she isn't looking and put them on a shelf. When we get to the checkout, she doesn't remember what is missing, but is happy with what we are taking home. So if you see things out of place in WalMart, it may have been me and Mom shopping!

-Shared by a Randolph County caregiver

Do you have a good caregiver tip that you would like to share with other caregivers? Share your idea by emailing it to: rcsaa2@senioradults.org, or by mail to: Randolph Senior Adults / I&OC
347 W. Salisbury Street
Asheboro, NC 27203



Self-care is giving the world the best of you,
instead of what's left of you.

-Katie Reed



Family Caregiver Support Program provides a range of supports that assist family caregivers

Eligible family caregivers are:

- A caregiver of any age providing care for an older adult age 60 or older or providing care for a person with Alzheimer's disease or related brain disorder.
- A caregiver (who is not the birth or adoptive parent) age 55 or older, raising a related child age 18 and younger or an adult with a disability.
- A caregiver age 55 or older (including parents) who provides care for a related adult with a disability.

In Randolph County these funds are currently used by the following agencies:

Randolph Senior Adults Association which provides Care Planning Assistance, The Powerful Tools for Caregivers workshop, Caregiver Skills Class, *The Nurturer* newsletter, and Nutritional Supplements.

Call Margie DiDona or Lisa Alley at 336-625-3389 for more information.

Regional Consolidated Services provides caregiver respite to provide temporary relief for the family caregiver. **Contact Teri Mabry at 336-629-5141.**

SUPPORT GROUPS

In-person groups may be cancelled or virtual due to COVID-19, contact for more information

Diabetes Support Group

Third Monday each month – 4:00-5:00pm
Randolph Health
336-625-9400

Alzheimer's Support Groups

Second Wednesday each month – 1:00pm
The Harry and Jeanette Weinberg Adult REC
Elaine Beane – 336-953-7775 or
Joan Wilson – 336-629-8155

Last Monday of each month – 5:30pm
Brookdale Asheboro
Emma Lambe – 336-672-6600

Second Thursday of each month - 6:30 pm
Cross Road Retirement Center
1302 Old Cox Road, Asheboro
Bernie Raymond - 336-629-7811

Support Services for the Blind

Third Wednesday each month – 2:30pm
(March-October)
The Harry and Jeanette Weinberg Adult REC
Christina Sterling – 336-683-8107

Marilyn Usher Parkinson's Support Group

First Tuesday of each month – 10:30am
Episcopal Church of the Good Shepherd
Annette Caughron – 336-629-6397

Aphasia Puzzle Program (Stroke & Brain Injury)

Second Thursday of each month – 11:00am
Randolph Health – 336-625-5151 x5109

**Alzheimer's Association
Caregiver Telephone Support Group**
First Tuesday of each month – 12:30-1:30pm
1-866-316-2054
Enter Code 5894744516

**Duke Dementia Family Support Program
Various Support Groups via Zoom**
Various dates and times
Natalie Leary - 919-660-7542

Meals-on-Wheels



Homebound seniors age 60+ may be eligible to have nutritionally balanced meals delivered to their home. For more information, contact your local senior center:

Asheboro	336-625-3389
Archdale	336-431-1938
Liberty	336-622-5844
Randleman	336-498-4332

**We are always in need of volunteers to deliver these meals, contact us for more information.*

I Am A Caregiver.

I Try.
I Do.
I Hope.
I Care.

eldercareissues.blogspot.com



**SPRING FORWARD
Daylight Saving Time
March 13, 2022**

Coloring Corner



Are you caring for a Veteran?

Call 704-638-9000 x15505 to see if you are eligible for services through the Program of Comprehensive Assistance for Family Caregivers (PCAFC).



DEMENTIA RESOURCES

Alzheimer's Association
1-800-272-3900 (24 hours/7 days)
alz.org

Dementia Alliance of NC
1-800-228-8738
dementianc.org

Positive Approach to Brain Change
1-877-877-1671
teepasnow.com

Lewy Body Dementia Association
LBD Caregiver Link: 800-539-9767
www.lbda.org

**Duke Family Support Program
Project CARE**
(Dementia and Alzheimer's)
1-800-646-2028
dukefamilysupport.org

ARE YOU OR A LOVED ONE ON MEDICARE AND STRUGGLING TO PAY BILLS?

Medicare beneficiaries may be eligible for various
Medicare Savings Programs

To lower drug costs, **Part D Extra Help** is available for individuals with monthly income below \$1,699, or \$2,289 for a married couple living together.

Those with income below \$1,529 (or \$2,060 per couple) may be eligible to get assistance so the \$170.10 monthly Medicare Part B premium will no longer be deducted from their Social Security check.

**Contact Margie DiDona or Lisa Alley
SHIIP Coordinators at Randolph Senior Adults Assn
336-625-3389 to apply**



5 STEPS FOR FIRST-TIME FAMILY CAREGIVERS

Caring for a family member or close friend who is aging or ill is one of the most important roles you can play in that relationship — and one of the most complicated.

The caregiving can happen suddenly with an accident or disease diagnosis, or start gradually with driving your loved one to get groceries or see a doctor. Later, you may find yourself preparing meals, handling their finances or taking time off work to address their growing needs.

Whether you're just beginning to anticipate a need or taking care of a family member full time, these tips, resources and checklists can help you get organized and find support on your caregiving journey. Remember: Just take it one step at a time.

1. START THE CONVERSATION

The right time to talk about the future is now, even if it's uncomfortable. Ask your loved one about their preferences, values and wishes for things that matter, from health to finances. If you wait until an accident, fall or serious diagnosis, when everyone's stress levels are sky high, your choices may be more limited and more difficult to evaluate.

Look for an opening. Rather than bringing up a tough topic out of the blue, find a suitable conversation starter — perhaps a recent comment from your loved one or an article you saw online. Example: “You mentioned your eyes are bothering you. Is this causing problems with reading or driving?”

Keep trying. For some people, admitting they need help can be hard. If your first talk doesn't go well, gently try again. If you are repeatedly shut out, consider asking another family member, a trusted friend or a doctor to approach the person about your concerns.

Don't avoid the subject of money. It's often at the heart of decisions you'll make as a caregiver. Respectfully ask your loved one to review bank accounts and health insurance so you can know how much is available to cover potential costs.

Listen to and respect your loved one's desires. The person you're caring for always should participate in discussions about his needs and plans, to every extent possible.

Bring others into the conversation. Ask a few other people close to your loved one — family members or friends — to be part of the process. **Conflicts may arise, but don't be afraid to talk through them. Better to do so now than in a time of crisis.**

2. FORM A TEAM

Trying to handle the responsibilities of caregiving by yourself can lead to burnout and stress-related health problems. Don't go it alone. Reach out to form a larger network of family, friends and community resources that can help you. And always remember to consider your loved one a part of the team.

Go deep and go wide. Team members who have little free time or don't live nearby can still play valuable roles. Maybe they can pitch in with bill paying, financial help or meal organizing. The computer whiz in the family could set up an electronic calendar for chores or dinner delivery.

Decide who's in charge. It's important to have a point person to keep the process moving and make sure everyone on the team understands plans and priorities. In most families, one person assumes the primary role by virtue of living nearby, having a close relationship with the care recipient or being a take-charge person. That might be you.

Consider a mediator. When difficult subjects and potential disagreements arise, engaging an outside facilitator, such as a social worker or minister, can be useful to keep the team focused and maintain smooth, productive communication.

3. MAKE A PLAN

Now work with your team to develop a plan, thinking both short term — such as determining who will be responsible for each caregiving task — and long term. You can't anticipate every detail or scenario, but being forward-

thinking now will help you respond more quickly and effectively in an emergency. That mind-set also helps ensure that everyone keeps the focus on what's best for your loved one.

Determine roles. Ask team members what tasks they can take on. Who is free to travel to medical appointments? Who can prepare meals a few times a week? Who can make sure the bills are paid? If you're the primary caregiver, delegating even small tasks can make a big difference in your busy schedule.

Be honest with yourself. Think about what you are prepared to do. Caregiving can involve intimate tasks, such as helping a loved one bathe or use the toilet. If you are uncomfortable with something, ask if another team member can step in. If financially feasible, consider hiring assistance.

Put it in writing. A written record will ensure that everyone is on the same page and avoid misunderstandings. Summarize and distribute the plan in writing and make sure everyone understands it will evolve as time passes and the care recipient's condition changes.

Find the best way to communicate. You may want to set up an email group to keep everyone up to date. You might also consider using an online scheduling tool such as Lotsa Helping Hands to organize and stay current on who's doing what, when.

4. CARE FOR YOUR LOVED ONE

This step encompasses the others, of course, and every caregiver's situation is different. But a wide range of resources and tools can make your job easier, whether you're caring for a parent who lives in another state, a spouse with a long-term illness or a sibling with dementia. In any caregiving situation, find out in advance where to get information and assistance.

Advocate for yourself. Let doctors know that you are the primary caregiver and need to be informed about your loved one's condition and treatments. Ask for training if you are expected to do procedures at home, such as injecting medication or changing bandages.

Keep the home safe. If the person you're caring for has difficulty getting around or their vision or hearing fades, some simple changes can make the home less hazardous. Consider installing items such as adjustable shower seats, grab bars, handrails and night-lights.

Stay organized. Caregivers need to keep track of lots of information — emergency phone numbers, health records, prescriptions and more. It can feel overwhelming. **Caregiving apps such as CareZone and Medisafe can help you stay on top of appointments, medication times and other key information.**

5. CARE FOR YOURSELF

Family caregivers find it easy to forget about their own needs, which is why caregivers often experience high stress levels, depression and other health problems. Don't neglect exercise, healthy eating and sleep. And take time for activities you enjoy. You'll need to keep up your energy and stay well to care for others.

Understand caregiving's costs. You might find yourself taking time off work, cutting back on hours, passing up promotions and paying for things like your loved one's groceries and prescriptions. Try to calculate these costs when doing family budgeting.

See if your workplace is accommodating. Your employer might be fine with you adjusting your schedule or working from home some days to meet caregiving responsibilities. If you need more time off, find out if the Family and Medical Leave Act covers your workplace. Eligible employees can take up to 12 weeks of unpaid leave a year for caregiving duties.

Give yourself a break. Sometimes caregivers feel guilty about taking time to have fun. Find ways to reduce your stress and enjoy yourself. Many caregivers turn to yoga or meditation, or arrange a weekly movie outing with friends. Think about what activities you find relaxing or energizing and put them on your to-do list.

aarp.org

HOW SMART TECH AROUND THE HOME CAN HELP SENIORS AND THEIR CAREGIVERS

Amy Goyer has been a caregiver most of her adult life. At 20, she began caring for her ailing grandparents. Then her mom had a stroke at 63, and her dad developed Alzheimer's. Later, her sister was diagnosed with Cushing's disease. Over the years, Goyer crisscrossed the country to care for her loved ones. At some points, they lived with her. Other times, she monitored them from afar. Now AARP's national family and caregiving expert, Goyer, 61, says the most notable change in caregiving in her experience has been technology — particularly the smart tech that many seniors rely on to stay safe in their homes. “New technologies are coming up all the time, and people are always sending me things to look at,” says Goyer, who oversees the organization's Family Caregivers Discussion Group on Facebook, which has more than 8,000 members.

Goyer recommends getting a medical alert system as a basic starting point for caregivers of the elderly. You may remember the phrase “I've fallen, and I can't get up!” from a commercial that premiered in the late 1980s. That system, LifeCall, is still one of the most popular ways to keep seniors safe in their homes. Here's how it works: People who need monitoring will have a pendant or wristband affixed to them. If they have an accident, such as a fall in the bathroom, they can push the alert button to call for help. There have been advances in this arena, such as radar fall detectors that can be placed throughout the home to monitor motion. If a person falls, the proper authorities will be notified without the person having to push a button.



Raphaela OBrien, president of Springfield, Va.-based AIVI Global, says sensors are an important component of her company's services for aging in place. “You're putting sensors throughout the house that let you know if they're going in and out of the fridge or in and out of the cabinet where their meds are,” OBrien says, or if they are sitting in the chair watching TV for an extended period. AIVI's package for caregivers also includes setting up emergency alert systems, automated security systems and wireless Internet.

This explosion of smart home technology has afforded caregivers a plethora of options for creating more meaningful and thoughtful living conditions for their loved ones. While a bachelor may use an in-home audio system for movie nights and house parties, a caregiver may use it to program reminders for when a parent needs to take medication or go for a walk. The audio alerts can even use the voice of a relative. “ ‘Hey, Mom, it's time to play bridge with your neighbor, it's time to get ready for dinner,’ ” OBrien says. When seniors are in a bad place emotionally, “it's comforting for them to

hear a loved one tell them something, even if that person is not there.” Home audio systems are also helpful for people who have trouble using a phone. “A lot of folks say they get a smart speaker, so they can just say the keyword and then call Mom,” Goyer says.

When she was caring for her parents, Goyer found that video systems helped calm her nerves. “Sometimes, I didn't even say anything. I just wanted to see them and know they're okay,” she says. Speaking to someone on video can also be revealing, Goyer adds. “You can talk to someone on the phone, and they can seem perfectly fine. But if you see them, you might see that they don't look like they've showered in a long time, or they're wearing the same clothes every day. You see the mail is piling up behind them or other red flags that more help is needed.”

While, anecdotally, monitoring tools such as sensors and video cameras have proved to be helpful, William Dale, director of the Center for Cancer and Aging at City of Hope, warns that these devices come with ethical questions. “Are you monitoring people who know they're being monitored,” he asks, “or are you tracking people who are unaware of it while it's happening?” Dale says video technology is better for communicating or when it's strategically placed throughout the home, such as near the stairs in case of a fall. The biggest challenge, he says, is people having monitoring devices without planning their next steps for when something goes wrong. “Someone fell down and now they're still just lying there without a plan,” he says. “I would be in favor of creating a safer home rather than simply observing.”

In terms of home safety, long-distance caregivers can take advantage of home integration systems they can control remotely, Goyer says. This can include items such as security cameras, video door alarms, water-leak monitors, temperature controls and smoke detectors. There's even technology that monitors kitchen appliances. “One of the things that happened with my grandmother was she caught a pan on fire. She forgot to turn the stove off,” Goyer says.

Now, there are affordable products such as discs that attach to a stove's knob and will continuously blink or beep after the stove has been in use for a preset amount of time and smart knobs that can control a stove's heating settings from an app. Caregivers can also invest in more expensive products, such as sensors that shut stoves off when they don't detect motion in the kitchen for five minutes.

For any caregiving technology, Goyer advises choosing products that offer over-the-phone technical assistance. And everyone needs to be willing to keep an open mind. “Sometimes people think of technology as, ‘Oh my gosh, I can't deal with that,’ ” she says. “And we have caregivers in every generation. A quarter of caregivers are millennials, so they're going to have a whole different approach to the technology than caregivers who are in their 80s caring for a spouse or their sibling or someone like that.” “Both the caregiver and the care recipient have to be open and adaptable to trying some of these things,” Goyer says.

By Christina Sturdivant Sani, The Washington Post

INCONTINENCE SUPPLIES

Randolph Senior Adults receives donations of incontinence supplies that we can offer to you at no charge.

If you are in need of disposable underwear, briefs, or bed pads, please give Margie or Lisa a call at 336-625-3389

DONATIONS NEEDED!

If you would like to donate incontinence supplies, you can drop them off at:
Randolph Senior Adults Association
347 W. Salisbury Street, Asheboro

DID YOU KNOW . . .

That Randolph Senior Adults has a medical equipment loan closet? We accept gently used walkers, canes, shower benches or stools, manual wheelchairs, and bedside commodes. If you would like to borrow or donate any of these items, please call 336-625-3389.

**Items other than those mentioned above can be donated to Christians United Outreach Center at 930 S. Fayetteville Street, Asheboro or call 336-625-1500.*

