



Coping with Dementia: Meeting the Needs of High Risk Caregivers

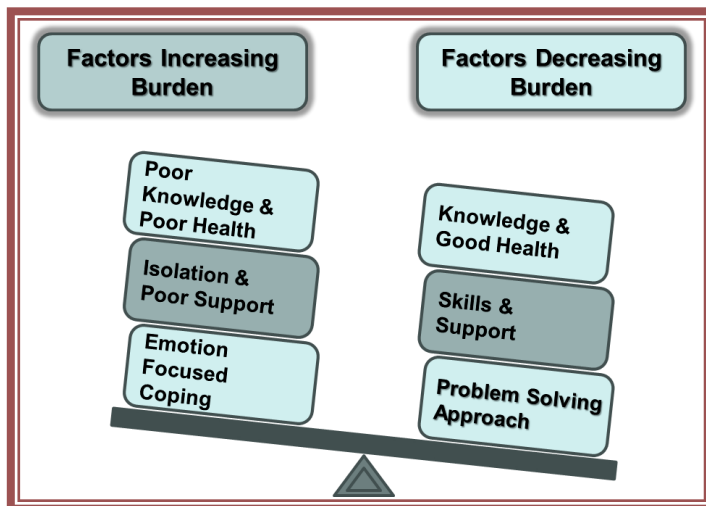
WHAT IS A HIGH RISK CAREGIVER OF A PERSON WITH DEMENTIA?

All caregivers need our attention, but some are at risk for their own decline.

High risk caregivers may be suffering emotionally and the care they provide can suffer too.¹

If the needs of the person receiving care are greater than the caregiver's capacity to provide it, both risk a decline in their health and wellbeing.²

Our goal is to tip the balance towards factors that reduce the negative impact of caregiving.



The Reitman Centre High Risk Caregiver Program can offer the following to support your work with caregivers of individuals with dementia:

- Individual case consultation and collaborative problem solving
- Developing your skills and knowledge through training and coaching
- Supporting your service development with tools and materials

“There are four kinds of people in the world:

Those who have been caregivers;

Those who currently are caregivers;

Those who will be caregivers;

And those who will need caregivers.”

*Rosalynn Carter,
Former First Lady
of the U.S.*

Consultations:

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Referrals to the Reitman Centre:

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Elements of Risk

Characteristics associated with high risk for caregiver distress:

Caregiver distress and burden arises from a complex balance between characteristics of the caregiver, the person receiving care, and the environment in which they both live.

Environment	Person with Dementia	Caregiver
<ul style="list-style-type: none"> • Limited income/ Financial instability • Isolated in the community • Lack of respite • Lack of support (informal, formal or professional) 	Behavioural disturbances: <ul style="list-style-type: none"> • Apathy • Agitation/Aggression • Depression • Irritability • Night time disturbances • Disinhibition • Impulsivity • Hallucinations/Delusions • Fluctuating symptoms Moderate to severe disability in basic activities of daily living (ADLs)	<ul style="list-style-type: none"> • Female • Spouse • 70+ years old • Lives with the person with dementia • Working • Chronic medical illness • Cognitive impairment
		<ul style="list-style-type: none"> • Lack of knowledge about dementia • History of depression, anxiety • History of strained relationship with the person with dementia
		<ul style="list-style-type: none"> • Self-perceived overload • Feeling trapped (role captivity) • Feeling control of the situation is out of their hands • Self-perceived lack of mastery and caregiver competence • Immature coping strategies

(Data from: Rinaldi et al., 2005; Tremont, 2011; Contador et al., 2012; Adelman, et al., 2014; Sadavoy, et al., 2012)

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