

Suburban Life

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giving CARE

A plight that begs relief

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By Loralne McClish
staff writer

CONTRARY TO THE belief that Americans are shuffling off the old folks into nursing homes, 80-90 percent of the medical care, personal care, household maintenance, transportation and shopping needed by the frail and disabled is provided by caregiving family members.

According to the U.S. Congressional Record (March 6, 1986), the unprecedented increase in the population 85 years and older and the increase in the incidence of disability with advancing age has resulted in 5.2 million older persons needing help with day-to-day tasks.

About 80 percent receive their care from wives, daughters and daughters-in-law.

The national office of Older Women's League (OWL) helped to bring about National Family Caregivers Week (Nov. 24-30) in an effort to focus attention on the person who is responsible for another 24 hours a day.

Locally, Farmington OWL members put us in touch with caregivers in this area willing to talk about the change their lives took when a close relative suddenly and unexpectedly demanded full-time care.

They talked about pushing wheel chairs up and down ramps and lack of funds for a sitter. They talked about taking on a job they weren't trained to do. They talked about bathing, dressing, spoon-feeding. They talked about constantly being within earshot, ever on the alert to respond.

IN ALL INSTANCES, the role of the caregiver was not only accepted, but preferred to any alternative.

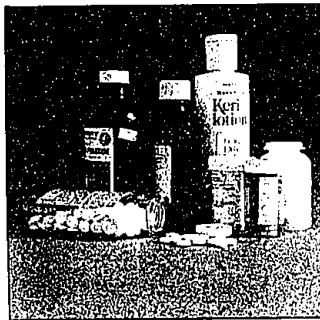
Russ Tuttle, public relations director for Botsford Hospital, spoke for many when he said, "Putting my wife in a nursing home was unthinkable. We've been married for 34 years. This is something you just do."

His thoughts were echoed by Betty Griffin, now retired from teaching at Mersey High School, when she said, "Putting him (her husband Garnett) in a nursing home never crossed my mind. I just hoped I would survive him. We were married so long that we could communicate with one another even when he couldn't talk. I don't know that anyone else could have done that."

And again, from Dora Geletvke, a Livonia resident caring for her husband who is going blind and is confined to a wheelchair, "You just have to do what you have to do."

Florence Twigg says her life has now fallen into a pattern. "It was a drastic change at first that took a lot of getting used to," she said speaking of a once-active social life and their careers. "Our social life is pretty much confined now to taking him swimming at Mersey Center. I enjoy doing that for him because it gives him his greatest pleasure."

While Twigg has no one to call on for respite, she takes advantage of borrowing talking books from Oakland County Library for the Blind, housed in Farmington Hills Branch Library, the use of Mersey's pool and a support group for stroke victims, both offered through Farmington Department of Special Services in connection with Farmington Hills Senior Adult Center.



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GELETVKE is 75 years old and has been a homemaker for all of her adult life. The confinement to her home is now absolute.

A friend from Grace Lutheran Church brings Carl Geletvke to his doctor's visits. A daughter does the shopping. Sunday church services are delivered to the house on tape.

"The most I get out now is once in a while into the backyard. If I'm out there too long, he gets angry," she said.

Twigg, well into retirement before her husband's stroke, spoke the most bluntly about anger on the part of the stroke victim.

"His personality completely reversed itself. That change of personality can be the nature of the malady so there are a lot of temperamental upsets. It's a common thing having to do with the amount of brain damage. "But it makes me the scapegoat. I'm the only one who's handy so I'm the only one he can take his anger out on," she said.

Griffin and Tuttle both continued to work after they became caretakers.

"Both my doctor and the hospital social worker advised me to keep my life as normal as possible and to maintain my own activities," Griffin said. "They had seen too many wives just drop everything and devote themselves entirely to another. In one instance, they told of a woman caring for a husband with multiple sclerosis who had so divested herself after 15 years, she had absolutely nothing of herself left when he died."

Tuttle had a mother, neighbors and friends from his church who were constantly keeping in touch with his wife while he was working, and he kept in touch by phone

two or three times a day.

"I get up a little earlier and go to bed a little later because I'm chief cook and bottle washer now. I'm in a routine. No meetings on Friday night because Friday night is laundry night," he said.

AS TWIGG SPOKE about the getting used to it all, Griffin spelled it out.

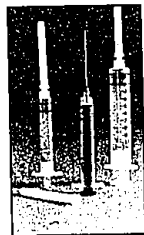
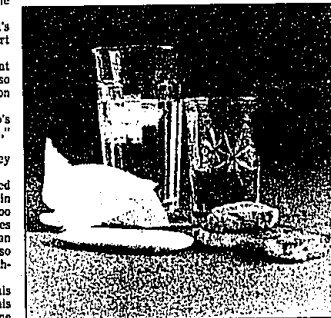
"Garn was discharged from Sinai Hospital for insufficient progress and I shall never forget that winter. I would get home from school and get him dressed in heavy winter clothes, then get him into the wheelchair and then into the car for the therapy sessions. I pushed that wheelchair up icy ramps and then down icy ramps. When we got home, it would be dark. Then I had to start thinking about dinner," she said.

Geletvke said she was unable to afford either a sitter or pay for an adult day-care center. Griffin she she was able to afford a sitter six hours a day only because she continued working.

"That is money spent that is not covered by insurance and it is not tax deductible.

"Money, or the use of it, like every other single thing that has to do with caregiving, has to be very well thought out ahead of time. Whether you are going out to dinner and where you will go, even going to a movie or a ball game, you had better be assured of the lines you will be standing in or what kind of accommodations they have to offer," she said.

As for sitters, she advises, "Go through an agency. The one time I hired someone on my own, turned out to be a flake."



Some thoughts on alternatives

Jan Dolan, a Farmington Hills councilwoman and a member of Older Women's League, established Orchard Hills Adult Day Care Center as a direct result of taking care of her mother. She shares her experiences as a caregiver, and gives her thoughts on the support caregivers must be given if they are to survive.

By Jan Dolan
special writer

Mother started showing signs of mental confusion around age 82. In hindsight, I found out that much of the confusion was the result of medication to alleviate the difficulties resulting from congestive heart failure. Had I known then what I know now, I would have made every effort to see she understood what was causing the confusion and allowed her the choice of maintaining a clear mind but perhaps shortening her life.

Mother did know something was going wrong when she was experiencing periods of confusion — this was very upsetting to her and was beyond her control — a very difficult time for someone who worked hard her entire life and, coming

from a background of being raised in Scotland, a very strong work ethic. Not being in control of her mental capabilities was most distressing. I was the only member of the family in a position that could adjust their work and community involvement schedule to take her in and care for her in my home.

One thought behind the establishment of the Adult Day Care Center was that if she did indeed need full-time custodial care, I would be in the position to assume that responsibility.

For several years mother was maintained in her own home with the help of a live-in companion. As the confusion escalated, a companion was no longer a possible solution. At that time she came to stay with me in Michigan.

Fortunately I had a husband who was very good with her and perhaps even more tolerant that I was. I guess I was really very angry at times over what was happening to this very important person in my life. Perhaps daughters tend to identify too closely with their mothers and perhaps in the back of my mind, I thought "What if this should happen to me?"



Jan Dolan

I believe that a caregiver sees their own frailty when dealing with someone they care very much about.

LIVING DAILY with someone who is confused can be pure frustration. The frail elderly can no longer take the point that they can no longer take care of even simple chores. Finding the stairs to go to the bedroom on her own became impossible, even when standing at the foot of the stairs.

With the aging of America, many alternatives must be explored to

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Support services urged

The Older Women's League (OWL) has adopted "Caregiver Support Services" as one of its major projects.

The organization, which is working to focus public attention on the problem, has assumed an advocacy role in supporting legislation aimed at enhancing the quality of life for those who serve as primary caregivers.

Margaret Walker, president of Farmington OWL, said, "This includes provisions for waivers which would set aside any means tests or other eligibility requirements for those who participate in model programs designed to relieve some of the problems."

"OWL is also encouraging the formation of peer support groups and their efforts to coordinate information about available services within each local community," she said.

Nation-wide, while most caregivers are women and most are older women, OWL's statistics show that about 800,000 are in the workforce. One in 10 must quit their jobs to care for others full time. Another two out of 10 must cut back on, or rearrange their work schedules.

'The strains can be physical, emotional or financial and are usually all three.'

— Margaret Walker



Margaret Walker

Because of these figures OWL is working towards state and federal legislation which will provide periods of unpaid leave to workers of either sex who are caring for frail and incapacitated family members.

"It is well documented that serious problems can and do develop for those who find themselves the primary, and often the sole, caregiver," Walker said.

"The strains can be physical, emotional or financial and they are usually a combination of all three. Ironically, many older men now in nursing homes today were originally cared for by wives who have since died in the course of performing round-the-clock services beyond their physical strength.

"The emotional isolation can be devastating. The stress from finan-

cial burdens imposed by medical expenses compounded by the reduction or loss of incomes and pensions can be staggering," she said.

Overall, OWL believes that families and government are going to have to work together in finding solutions to the problems of the long-term home care for the severely disabled.