

# Part 7

## Where Do We Go From Here?

Most support for family caregivers comes from community agencies and national organizations, composed primarily of nurses, gerontologists, social workers, and marriage and family counselors. Professionals in other fields, such as financial advisors, lawyers, medical doctors, and human resource personnel, are beginning to focus on the challenges of family caregivers. The time has come for career counselors and related practitioners to address the needs of this “shadow workforce.” To support family caregivers, I propose a career and caregiving wellness model and a family career and caregiver counselor (FCCC) certificate program to train a cadre of skilled, compassionate career counselors to implement the model.

### Chapter 16

#### A Wellness Model to Manage Career and Caregiving

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Caregivers are often isolated. By looking outside ourselves, we can learn from other caregivers, and as importantly, from care receivers. Although this monograph mentions only briefly care receiver perspectives (Leibhaber, Chapter 11; Colozzi, Chapter 12; and English, Chapter 15), our cared-for have much to offer. When we can acknowledge that we all are both caregivers and cared-for, the caregiving experience becomes a larger community learning experience. In a way we are all care receivers, because to help others without burning ourselves out and to set good examples for the next generation of caregivers (who may be taking care of us), we need to make sure that we take care of ourselves.

My 90-year old mother walks over a mile several days a week and updates me on world news that she has time to watch on television, and I don't. She questions everything she hears and sees on the news. I carry on her questioning approach through my work by interviewing career and wellness leaders on challenging issues, such as caregiving.

For 10 years, my mother cared for my father, who suffered a double stroke at the age of 64. While she was caring for my father, my husband

and I were bringing up two children, one of whom was born with a disability. As a young adult, I learned to seek support from others to manage challenges. I learned from my son and other individuals with disabilities to look up to, not down upon, those who have experienced extraordinary challenges. When I mentioned the word “caregiver” to Gary Karp (2008), a wheelchair-bound disability educator, he responded, “Can’t you think of another word? People with disabilities value independence.” I have not yet come up with another word to replace caregiver. The closest I’ve come is a derivation of the root word of career, caregiving, care receiver, and self-care—the Latin root, “carriara”—a road for carts. Whether “caregiver” or “cared-for,” we’re journeying together and assuming multiple roles on a rocky, winding road, as mentioned in the Introduction to this monograph, or, as described below, walking together on a tightrope suspended above water.

I’m a distant caregiver for my mother. When she could no longer cope on her own with icy New England sidewalks, she chose (with the encouragement of her adult children) to move from the community where she had lived all her life in

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New England to an independent living facility in Florida near my brothers and their retired wives.

Since I live across the country from my mother, I chat with her on the phone every day, compose family digital albums and memoirs, and attempt to work with my brothers to provide quality care for her. I bring her into my work figuratively, writing about caregiving, conducting workshops, and volunteering in my community. My work and travel schedule revolve around visits to her.

The entire direction of my work changed after I moved my mother. Family always had priority in my values, but as my mother moves into her 90s and I move into my 60s, the aging process has moved front and center in my mind and has influenced my work focus. The clock is ticking for my aging loved ones. Born shortly after World War II ended, I am also aware that the clock is ticking for my peers and me. Even if we live another 40 years, we are more conscious of end-of-life issues than when we were younger.

### Career and Caregiving Wellness Model

The following is a compassionate career and caregiving process based on the tightrope artist model (Gelardin, 2006) and other career development and transition models (Avis & Connelly, 2001; Goodman, 2002; Knowdell, 2002). In this model, to make a decision, you can start at any step, but it's best to cover these three steps:

- (a) Who am I? (personal strengths)
- (b) Where am I going? (research)
- (c) How am I going to get there? (setting goals/intentions and taking action)

Like the dental model of career development (Goodman, 1992), it can be helpful to go through these steps regularly, because our personal attributes (Step 1) may change over time, as may our goals. As in learning to walk the tightrope, learning to balance career and caregiving requires the ability to adapt to new situations and an awareness of how the mind, body, and spirit work together.

It "is almost like learning to walk again" (Antoni, 2003).

### Step 1: Who Am I?

Before figuring out solutions, it can be helpful to understand one's strengths and challenges. In addition to identifying one's values, motivated skills, personal style, and interests, like the tightrope model of career development, the career and caregiving wellness model includes the following factors: family influences (Gelardin, 2002), inner motivations (English, Chapter 15), preferred learning styles, and environmental preferences (Muscat, Chapter 1; Gelardin & Muscat, Chapter 2; Leibrock, 2009).

The following questionnaires could be useful to identify caregivers' strengths and challenges:

- Family Caregiver Assessment (Family Caregiver Alliance, 2009).
- Caregiver Self-Assessment Questionnaire (American Medical Association, 2008).
- Stress Indicator and Health Planner, along with other self-assessment tools for communication and learning (Anderson, Keis, & Shenson, 2006).
- Housing Needs Questionnaire for caregivers and cared-for (Muscat, 2008).

### Step 2: Where Am I Going?

For caregivers, research might include exploring housing and accessibility options, learning about employee benefits for working caregivers or starting a home business, and seeking legal and health counsel, as well as psychological and social resources. In addition to surfing the Internet, caregivers can explore continually evolving media, visit the library, bookstores and local agencies, set up in-person meetings, attend events on topics of interest, volunteer, and find mentorship experiences.

As a parent and worker, I was always in gear: commuting to the workplace, searching for the

next job or business opportunity, and bringing up children. When I stopped working full-time in 2000, though I was busy writing books, designing curriculum, and conducting training programs, I felt out of place walking into a grocery store in the middle of the day. Now I see others in my county, mostly in their 50s and 60s, walking around town in the middle of the day, exercising and meeting at cafés. Many of the residents in my county work at home on their computers, at any time of day or night. My county has the highest percentage of aging adults of any county in the state of California. Wherever I go—the gym, the hardware store, the bicycle path—I listen to stories about caregiving aging parents and partners.

A few ways that I research caregiving issues include the following:

- Delving through family photographs and records and compile handmade books for the family;
- Attending my county's council on aging monthly meetings and other events on aging to learn more about the field and network with board members and agency leaders;
- Participating in local events and workshops that benefit older adults and individuals with disabilities;
- Surfing the Internet and talking with professionals in the field of caregiving;
- Exploring accessible housing alternatives, such as housing where the caregiver and cared-for live in the same community, with support from the community.

### **Step 3: How Shall I Get There?**

The third step is to set goals and action plans to carry out our goals. In the career and caregiving wellness model, goals may need to be modified at any time because of the volatile nature of career and caregiving. For example, a couple who worked hard all their lives, saved for retirement, and planned to travel might find themselves car-

ing for a frail elderly parent and facing reduced savings due to the state of the economy. They may need to change their focus, set a different intention and develop a different plan of action, and not to take immediate action on their travel plans.

According to Bright (2009), stability comes from continual change. "Sometimes that change will be unpredictable, disproportional, sometimes painful and sometimes fabulous" (para. 3). How you view your career and caregiving situation is similar to how you view other life/work situations; it depends both on the demands of the situation and on your view of life, in general.

By building upon my motivated skills (writing, counseling, teaching, public speaking), primary talents (generating ideas, developing a network of contacts, inspiring others), highest values (family, making the world a better place, helping people), and interests (caregiving, wellness, and aging issues), and after conducting field research on family caregiving, I now choose to conduct telephone interviews with career and wellness experts, edit and write books, articles, and professional journals, and conduct workshops on career and caregiving issues.

Bright and Pryor (2008) suggest that counselors assist clients "to reinvent themselves continually, to identify opportunities, to recover from setbacks, to find meaningful work that matters to them and to others and to capitalize on chance" (p. 72). Through the tele-interviews, I share practices relevant to the needs of society (i.e., informing, transforming, meaning, mattering, living with emergence) with counselors and other career practitioners. I can do my work from anywhere in the world (adaptability, flexibility), which allows me to visit my mother and other family members. Listeners, many of whom may have caregiving responsibilities, can also participate from their environment of choice (controlled flexibility).

You may choose a different route than I have chosen to manage your aging process, depending upon your strengths, motivations, and situa-

tion. You may continue to flourish in a fast-paced environment or in a job with security and future pension. You may choose to work in a job you do not like out of necessity to support your family or prepare for your own later years. You may retire without caregiving responsibilities or have such huge responsibilities that you barely have a moment to read this chapter. You may own a home and choose to renovate it, rent it out, take in boarders or caregivers, or sell it and rent a smaller home on flat land near a town center or a walking path. You may be in the midst of job search or in a career or life transition. You may choose not to do anything at the moment. Whatever your situation, it can be helpful to know why you are where you are in your career/life process and to keep open to alternative routes that you may choose to take in the future.

### Conclusion

*And as I was walking I started to notice that it wasn't that I was getting more balanced, but that I was getting more comfortable with being out of balance. I would let the pendulum swing a little bit further and rather than getting nervous and over-compensating by leaning too much to one side I could compensate just enough. And I thought, I wish I could do that in my life when things are getting out of balance.*

Antoni (2003)

The process of managing career and life challenges does not always go smoothly. Steps to making career and life decisions—self-assessment (who am I?), field research (where am I going?), and goal/implementation (how shall I get there?)—often become blurred for those who are caring for a loved one (or even multiple generations of loved ones) and/or dealing with income producing work, personal health and aging issues. For individuals in caregiving situations, it's gentler to refer to

“goals” as “intentions” and action plans as a “process in flow” (Miller-Tiedeman, 2008).

Unexpected situations may place care for a loved one over a work commitment, as it did for me when I helped my mother recover from an eye operation rather than speak at a conference. If we view our aging process and caregiving responsibilities as a work in process, comparable to driving a cart or car along a windy road with alternative routes or balancing on a tightrope, then we become less focused on results and more on paying attention to each moment. With this approach in mind, we can lift the veil off the “shadow workforce” of caregivers.

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