



September 2023

When Family Dynamics Collide with Caregiving

When it becomes apparent that an aging loved one is in need, the list of decisions to make can be quite long and complex. While having multiple people available for support can be beneficial, family dynamics may end up complicating the situation and increasing the stress level for everyone involved.



Consider the family dynamics in the following scenario...

Mom cannot make any decision about Dad's care. She has some memory loss, but Dad's sudden serious illness has her in turmoil; she's unable to sleep and confused with all the medical jargon and options.

Dad made all the decisions in our family; mom was what you would call a traditional homemaker. She went to college and then worked as a teacher, but only until us kids arrived. The last fifty plus years her role was that of caregiver and her world was limited to her home, church, and a few friends.

To make it more challenging, there are four children: two live across the country and the two that live locally differ in what they think "should" happen now. The two nearby have never gotten along. The two at a distance are both very practical and not emotional, believing they have all the answers but no time to be active in the lives of the parents.

On top of the individual challenges in this family, we have traditional values that have been passed on from previous generations. Mom firmly believes one of the kids should take them both in to live in their home, because both she and her husband had their aging parents live in the household when they needed help.

If the above rings even slightly true for your family, you and your loved ones are likely feeling a heavy weight on your shoulders. Or maybe no one is yet in need of care, but you know your family dynamics are going to make things tricky, if and when the situation arises. I am going to give you some tips from my book, [*The Empowered Caregiver*](#), that might help, whether you are the older couple in the scenario, or one of the four children.

1. Older Couples:

- Care Planning: Plan for the scenario of each of you being a caregiver. Write down what you want and do not want should one of you become incapacitated. Do not plan to go live with a child unless that had been discussed with that child and a counselor. Make sure this is clear in your [Advance Health Care Directives](#). Life happens – make it reflect your values and wishes.
- Cultural and Religious Values: Even if you share cultural and religious values with the rest of your family members, traditions can have varying degrees and not everyone will know exactly what you wish to occur. Again, get these written down in your legal documents and discuss them with your family before a need arises.

2. As a group, come to an understanding of what roles will be taken on by each family member. Who will assist with day-to-day care? Who will help with financial decisions? Who will hold Power of Attorney? Try not to let extended family dictate what should or should not happen.
3. Early planning and family meetings that share values on care at end of life take away guilt and confusion when the moment arises. Older family members need to share with their family what is important. Be sure the person making decisions understands them and that the others will respect those decisions. Many individuals do not want heroics at end of life and sign documents like the “[POLST](#)” (Physician Orders for Life Sustaining Treatment) form which dictates end of life interventions or not.
4. Hold a family meeting with all who can participate. If one of the party has a dementia (such as Alzheimer’s) you might not want them to participate. If there is conflict in a family, you might want to do this with a non-biased mediator ([Aging Life Care Professional](#)). The two questions each person answers first are: 1) Who are you most concerned about? and 2) What would you like to be the outcome of this meeting? Each person answers these questions, and no one can comment until everyone is heard. Then you prioritize the issues and maybe just work through one. Example might be “Dad can’t be cared for by Mom because he is hard to move and Mom is already compromised with memory issues. So, let us look at the options for Dad today.” Before the meeting ends, everyone takes some responsibility for the actions necessary to get Dad the right care.
5. Confronting greed can come up in these decisions. The best way to avoid family members prioritizing their own inheritance over the financial requirements of care is to have the ideals and values along with wishes of the parents’ clarified long before there is a need. The other option is to have a non-family member in charge of the finances; that can be a professional fiduciary or a bank trust department. Remember, good care is what you want; and you might benefit from an Aging Life Care Expert acting as a neutral person helping with the plan of care while taking into consideration all the variables of the situation.

Affirmation: “I do not care alone. I ask for help in kind ways”