

elevate your RELATIONSHIP

Caregiving Spouses

Many couples look at later life as a time of relaxation and contentment. With working years and raising children behind them, they now have time to enjoy leisure activities and new interests. How do later-life couples maintain their positive marital relationships as the health of one partner deteriorates and the other assumes a caregiving role? Many couples accept the changes as a natural part of the love relationship they committed to when, as they married, they vowed to love “in sickness and in health.”

The strength of their marriage commitment is evident in the efforts caregiving spouses make to preserve the self-esteem of their ill partners. In their article *Preserving Personhood: (Re) Membering the Spouse with Dementia* (2005, *Family Relations*), Drs. Jo Ann Perry and Deborah O'Connor cite four strategies that caregivers use to preserve their spouse's self-esteem.

- **Maintaining continuity.** These caregivers remembered and shared detailed descriptive pictures of who their spouse was or used to be before the illness. Some based their spouse's current behavior on lifelong habits and explained “he/she has always been like that.” Others recognized the differences in past and current behaviors and attributed them to the disease.
- **Supporting competencies.** These caregivers identified those things that their spouse was still able to do and encouraged him or her to do as much as possible. They tried to enable their spouse to function as independently as possible.
- **Protecting from incompetence.** These caregivers took steps to insure that their spouse would not be embarrassed by their inability to perform certain tasks. Strategies they used to protect their partner included: talking about the inability in such a way that the loss appeared normal (everyone forgets things), changing their expectation from completing activities to participating in them, taking charge of activities while making it appear that they were not, and isolating their partner from events or individuals who would contribute to their feelings of inadequacy.

- **Strategizing encounters.** Some caregivers tried to maintain a normal appearance during public encounters by assuring that their partner continued to have good personal hygiene and appropriate dress. Other caregivers openly discussed their spouse's limitations and expected others to accept them.

What types of professional support do caregiving and receiving couples need? In her essay *Caring for the Caregivers of the Elderly: Having Fun While Doing Good*, Judy Zarit suggests that couples need (1) information about the illness, (2) suggestions for solving problems brought on by the illness and (3) social support. She recommends that couples work with health care professionals who are skilled in addressing the specific needs of the care recipient. While a physician may be the most appropriate professional to address physical needs, a psychologist could be the most appropriate primary health care provider for a mentally impaired spouse and his or her mate.

Chronic illness does not have to weaken the bond of long-time love. Many older couples keep their commitment to love even as their relationship changes.

Activity

Sit down with your partner and talk about your favorite memory from each decade of your relationship, or your favorite memories overall. Then talk about each of your favorite recent memories together. Remembering joyful or funny occasions together can help maintain continuity and remind you both of the commitment you have shared.

For more resources, visit healthyrelationships.uga.edu and ElevateCouplesGeorgia.com.

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