# Guiding the Journey: Caring for Self and Others

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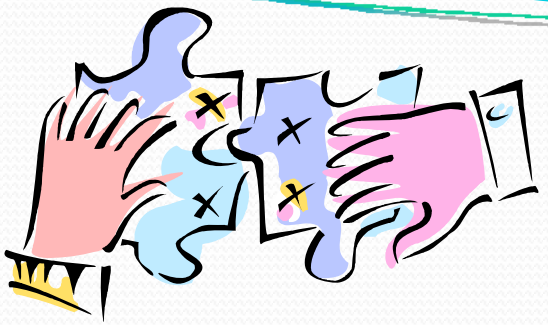
# Objectives

- Discuss strategies for working with diverse informal caregivers and supporting them in their roles
- Describe the 6 Cs approach to guiding
- Use an interactive style to share aspects of our journeys and build upon our “collective wisdom” about informal caregiving and the formal system

# What are some differences and similarities between formal and informal caregiving?



1. What do informal caregivers need when working with the formal system?

2. What skills are needed when working with informal caregivers?

# Informal Caregiving: Themes

- Loss and grieving
- Adapting and coping
- Short and long-term impact

Sawatzky and Fowler-Kelly (2001)

- Resilience – hope?
- What are other themes arising from you lived and work experience?

# 6 Key Obstacles to Understanding Other People's Realities

- No perceived benefit
- No time or energy
- No skills or experience
- "Much History" and past issues
- Needing to be right and needing to be the expert

list adapted from Wilson 2009

# 6 C's: Guiding and Supporting

- Communication/Collaboration
- Caring – self and others
- Cultural Sensitivity
- Can Do
- Co-creating solutions
- Commitment

# Communication & Collaboration

- Communication is an ongoing process
- Various kinds & styles – non-verbal
- Various kinds of messages/meanings sent & received – information; respect/disrespect; emotional states; “bussiness”
- What are the caregivers informational needs? – what, when, how and where
- Invite dialogue - collaborate

# Communication & Collaboration

- Listening – Is this a lost art?
- Listening to the caregiving story - journey
- Blocks to communication – interrupting, pre-mature advice giving, false reassurance,
- Explore language used in communication-
  - What language or words have been used in formal care settings to describe families/informal caregivers?

(Ashmann & Lawrence, 1999)

# Communication is crucial to…

- Relationship building
- Information gathering
- Assessment
- Open dialogue & learning
- Decision making
- Negotiating, Collaborating
- Addressing concerns
- Managing expectations

# Yes, effective and meaningful communication takes time, effort, and patience

# Caring for Self and Others

- Self work – reflection and self awareness
- Knowing our triggers and warning signs
- Attending to needs holistically – physical, spiritual, emotional, social, employment etc.
- Working with others to meet needs holistically

# Cultutal Sensitivity: What is culture?

Culture is …

**C**ommonly
**U**nderstood
**L**earned
**T**raditions
**U**nconscious
**R**ules of
**E**ngagement

Srivastava 2007

Examples of difference:

# Individualism / Collectivism

*Individualism*

- Focus on the "I"
- Emphasize
  - goals, needs, views of the individual;
  - individual preferences, rights, and pleasure
  - individual initiatives and outcomes
- Reward individual initiative and achievement

*Collectivism*

- Focus on the "WE"
- Emphasize
  - goals, needs, views of the group
  - shared in-group beliefs
  - cooperation with in-group members
  - harmony
- Reward support to the collective and collective achievement

# Communication Styles: Differences

| | |
|---|---|
| Directness | Implicit .....Explicit |
| Topics | Personal (self disclosure).....Impersonal |
| | Formal (written, verbal) ..... Informal |
| Formality | Much expression .....Little Expression |
| Gestures | Meaning of different gestures !!!! |
| Eye contact | Direct ..... .....Indirect (Age / Authority) |
| Touch | Much touch..... No touch (Gender / Age) |
| Proximity | Close.....Distant |
| Pace | Rapid .....Slow |
| Pitch | High (Loud) ..... Low (Soft) |

# Context of Communication

***High Context Communication***

- more responsibility on the listener – to hear, to interpret, and then to act
- more need for silence; longer pauses [to reflect, understand the context, and process the message]

***Low Context Communication***

- the responsibility for communication clearly lies with the speaker; it is better to over communicate and be clear than to leave things unsaid
- silence and pauses are often misunderstood as signs of agreement or a lack of interest

# Context of Communication

***High Context***

- most of the message is in the physical context or internalized in the person, and less is explicit
- more emphasis on what is left unspoken, more likely to "read into" the interactions
- less reliance on verbal communication – the obvious does not need to be stated

***Low Context***

- most of the information is made explicit in language used
- information is often repeated for emphasis to ensure there is no misunderstanding (if it is relevant and important it must be stated, if it is not stated it is not relevant)

# Communication: Language Support

- **Determine need for interpreters**
  - Time constraints
  - Recognizing the need for cultural interpretation
    - Getting By ….
    - Overreliance on own skills
    - First language
    - Impact of crisis on language skills
    - Language preference

# Meanings Ascribed to Behaviour

- Eye Contact /Avoiding Eye Contact
- Nodding of Head
- Silence

- How do meanings ascribed to the above behaviours? How might ascribing meanings impact persons?

# How do others perceive your power?

# Can Do

- When working with the formal system, informal caregivers often become discouraged by hearing what cannot be done
- Adopt and encourage a can do – solution focused approach
- AVOID negative thinking and communicating – can't, won't, impossible
- Explore options and alternatives
- Listen well and engage in concrete acts of kindness
- When it comes to complex issues for which solutions are hard to arrive at listening, acknowledgement and time are helpful and valued.

# Co-creating solutions

- Look for strengths
- Remember – collaboration is a two-way street
- Keep an open mind and be willing to explore creative solutions
- Crisis Plan, Schedule, Resources
- Self Care Plan – Permission to care for self
- Identify what support is needed with understanding and navigating systems.
- Coordination – who does what, when, how
- Care, LEARN, share… Each of us is always learning and changing so there is always more to discover (Wilson, 2009)

# Planning & Negotiating Care

**L** Listen to person's views

**E** Explain your / team views

**A** Acknowledge differences/similarities

**R** Recommend options

**N** Negotiate agreement

Adapted & developed from Luckman (2000)

# Debriefing Events

- Keep the tone constructive and positive
- What happened? Build a shared picture of the event
- Overall, what went well
- How did each member of the team contribute?
- What remains to be done right now?
- Have we met the immediate needs of each person who experienced or witnessed the event?

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# Commitment

- Commit to the following throughout the various successes, stops, and detours on the caregiving journey
- client-centred care and service
- honouring persons
- the partnership and the partners
- "standing for the success" of caregivers
- holistic self care
- the provision of "**felt**" support
- advocate for macro approaches, environments etc to support the work/people

# Comments, Questions, Discussion

# Thank You

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