

Daughterhood the Podcast

Episode #60 How to Live Fully in Dementia Caregiving with Dr. Sheri Yarbrough

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Disclaimer 00:00

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Rosanne 00:51

Hello and welcome to Daughterhood the Podcast, I am your host Rosanne Corcoran, Daughterhood circle leader and primary caregiver. Daughterhood is the creation of Anne Tumlinson, who has worked on the frontlines in the healthcare field for many years and has seen the multitude of challenges caregivers face. Our mission is to support and build confidence in women who are managing their parents' care. Daughterhood is what happens when we put our lives on hold to take care of our parents. We recognize this care is too much for one person to handle alone. We want to help you see your efforts are not only good enough, they are actually heroic. Our podcast goal is to bring you some insight into navigating the healthcare system provide resources for you as a caregiver as well as for you as a person, and help you know that you don't have to endure this on your own. Join me in daughterhood.

Dr Sheri Yarbrough is the owner of praxis, senior caregiving solutions and the author of OMG! I'm the Grown Up! A Conversation on Giving Care to a Loved One and Yourself.

Prior to becoming a family caregiver, Dr Yarborough was an organizational change consultant for education and not for profit organizations. When Alzheimer's dementia arrived without warning, she used her ability to view a circumstance from multiple perspectives to understand what her mother was experiencing that became the genesis for her care management strategy, the Praxis for care. Living the Praxis for care helped create her motto, caregiving is what you do for your loved one. Giving care is what you do for both of you. Today, Dr Yarbrough and I discuss a range of topics, including identifying your need for support, focusing on what remains rather than what is lost in dementia, allowing your relationship to evolve, and the important difference between caregiving and giving care. I hope you enjoy our conversation.

Rosanne 02:58

In caring for someone living with dementia, everything changes through the journey, not just with your care partner, but with yourself. They are losing capacities. They may be aware of it in the beginning, and you may be or may just think something's off, and this sets us down that long road of dementia caregiving. Sheri, you talk about the difference between caregiving and giving care. Can you tell me about that in the space of how we can survive our caregiving journey?

Dr Sheri Yarbrough 03:25

Sure, I think it's important to recognize that caregiving is a unidirectional approach, where your entire focus is on meeting the care needs of your loved one. And I think it's rooted in this, in the question that often comes when the loved ones care needs arrive on your door. Hello. The first thing you think, it's kind of overwhelming. So the first thing you start thinking is, oh my God, how am I going to do this? And when you ask yourself, How am I going to do this? You can't go into it shifts you into that checklist mode, okay, what has to be done? Let's, let's make sure everything gets done. And so you're so focused on getting everything done that you overlook what you need in order to get everything done right. When you're caregiving, you're extending so much care to this other person because they're no longer able to perform the tasks they once did, that you lose sight of what do I need to in order to be replenished? And so giving care shifts the question from how am I going to do this to what do I need in order to do this right? And so that's what helps you, when you start thinking about the support you need in order to continue caring for this loved one. Now you're not stuck in this cycle of trying that I described in my book, of doing it all, all at once, all by yourself. You're getting replenished so that you have enough care to be able to give to the other, to the person for whom you're caring. And that's the primary difference between the two.

Rosanne 05:22

And you say, if you're solution based, it's harder to deal with, and I totally get that, because we're constantly looking for the solution of whatever we're doing, and sometimes there isn't, and especially with dementia care, there isn't a solution. And that's kind of hard to take in and to look at and to accept. How can we do that? How can we alleviate some of that for ourselves?

Dr Sheri Yarbrough 05:48

Well, the first thing is that we have to be patient with the fact that we're only human, yeah, and as human beings, we can only do as much as one human being can do, and that's really hard to embrace when you have all this stuff coming at you. You've got all these needs. You're managing medications and then trying to make sure that the person eats properly and what go making sure that to be discreet about it, what goes in comes out, organizing the house to eliminate trip hazards and making sure that the person is positioned in bed so that she doesn't roll over and fall out in the middle of the night. So with all of those things going on you're so focused on, let me just make sure that we get all those things done. And sometimes, as one human being, that's just more than you can do, and giving yourself patience to say, okay, maybe I need to stay in control of the food. But is there someone else that can help you, or is there a tool that can help you manage all of the appointments and the medications and things like that? So giving yourself space to say, I can't do it all. I need support, and figuring out how that support is going to look for your journey,

Rosanne 07:08

Right. And you know, we hear a lot in our in our Daughterhood circles, about people you know who are caring alone, they don't have any other support, whether they're an only child or they are a sibling in a family of other siblings that aren't helping, or whatever, whatever the situation is, or they're caring from a distance, or whatever, it's hard to try to figure out how to find that support and how to identify it. And I know that you talk a lot about identifying, you know, identifying what you need. And with dementia, sometimes you don't know what you need, no and you might what you need. Today was going to be different. Next week, it's going to be different. In three months, it's going to continue to change. So how do we go about trying to identify what support we need and then accessing that support

Dr Sheri Yarbrough 07:57

It's important to and you said something, allowing it to evolve. Sometimes we get into this space of, okay, got it done

Rosanne 08:09

Right. And that's not it.

Dr Sheri Yarbrough 08:10

And we wanted to, want to go, got it done, because we need to alleviate the stress of things that aren't done. And with dementia, illnesses, there's so many uncertainties. It is an unpredictable disease that affects every person differently, and it's in that space of being uncertain that we want to grab some control, because this is definitely a disease that can make you feel out of control. And so one of the things that I it took me a while to learn was to embrace the fact that it's going to change. And so if I can delegate something, then the smallest thing having someone come, someone come once a week and do the laundry for me, right? No, your sibling. Every sibling is going to walk the journey in his or her own way, and some siblings have a more difficult time accepting mom or dad's decline than others, some siblings and the dual edged sword about being getting really good at being the family caregiver is the better you are at doing it, the less apparent the need for support is.

Rosanne 09:38

Absolutely.

Dr Sheri Yarbrough 09:40

And so it's important for you to say, hey, I need support. And sometimes support comes from unexpected places. It may not be that sibling and just kind of want to back up for a half a step taking dementia. Journeys are extremely emotional. And so you're going to have a lot of emotions. Your loved ones having a lot of emotion. Your siblings are having emotions, your friends are having emotions. Your parents friends are having emotions. All these emotions are there. And so it's important to understand everybody's experiencing this in their own way. And so when you're feeling alone in this to understand, no, I'm not alone, and where can I find that support? It's not going to jump out like a Google algorithm. It's not going to be as easy as and I'm going to date myself here as opening the Yellow Pages and finding it, but being consistent with it, consistent for yourself and understand it's not going to happen overnight, but working hard to find that support, you got to make difficult decisions anyway. It's going to be a difficult

journey anyway, so you may as well take the difficulties that are going to ultimately give you some relief and work on those.

Rosanne 11:04

Absolutely yes, yes. And do you know it's very interesting what you just said, it's almost like we focus so much on the care, right? Okay, so we're providing this care, and then it's like, okay, find support. Well, nobody can do because this is a caregiver thing too. I have to then explain all of the stuff that I do to you to provide the same care that I'm providing so that I can leave the house, which is just adds more stress. But what you said is, if we could find people that could help us, so maybe finding that support to I need something out that I can't order online, and somebody picks it up for you, or, like you said, somebody to come to do your laundry once a week, or somebody to, you know, I don't know, mow your lawn or cut the or clean your house, something, but to open that care up to ourselves, and I think we miss that step because we lose that touch with ourselves. We forget about that piece

Dr Sheri Yarbrough 11:08

Absolutely and that's why my focus has really been on self inclusion.

Rosanne 12:14

Yeah

Dr Sheri Yarbrough 12:15

You are an integral part of this kiddo journey. It's like riding a teeter totter when you're a kid, if you're the only one on the teeter totter, it's not going anywhere, right? Yeah. And so you have to make yourself an integral part of this care relationship. You've got to be able to swing on your end and give someone else balance it on the other side so that you can move up and down, at least sometimes. And I'll put that word on it, sometimes move up and down easily and cooperatively. Yes, there will be those days when it's going to swing wildly. Yeah, but when you make getting the support you need a lifestyle, it's not just a one and done. It's not just it's over and done with, but it becomes your lifestyle. Now you're in now you have those tools that, when it starts swinging wildly, you can ride that swing up and down wildly, and then you've got your tools that are that'll help slow the momentum back down, and let's get us back to that pace where we can work cooperatively, but you've got to be in there, and you've got to take that, that you've got to be willing to make the difficult choices and do the hard work for yourself, so that you have the care to be able to extend.

Rosanne 13:41

Because you matter in this relationship. It's not a one sided relationship, even though we're not really noticed by people outside of our care partner in our care relationship of what we do, because we're doing it and it, you know, well, you're just caregiving. And it's more than that. It's allowing ourselves to be in that duo, because we're a duo. We're a couple, whoever your care partner is, whether you get along with them or not, you are a duo Absolutely, and both of you have to work. And I remember in your book you had said one of your friends said, If you stumble, she falls.

Dr Sheri Yarbrough 14:18

Absolutely and so it took me a while to embrace that. Yes, I heard those words and and I understood those words because I speak English, and she said it in English, so I understood those words right. But I didn't understand what those words meant until I started to say until I finally hit that space of, I can't do it this way anymore. And when I started looking for tools that would prevent me from stumbling and gave me the support so that I wouldn't stumble, then I could breathe again. And then it was kind of like, oh. So I see I'm here. I had to reframe that from, I can't stumble, to, okay. What do I need to get out of my way? What support do I need? Where am I to prevent me from stumbling in the first place? I have to have that. And it took me from it took me a while to deal with that, because when you're when you first start caregiving, there's, let's just be honest, there's always one in every family, yes, and that role has always been there. You've always done things throughout your life that's been very caring. So that expectation tends to be there in every family we know, who is whom, yes, so that expectation that you're going to care is kind of there to begin with, and so, but when you're walking this care journey through a dementia illness, and for women, we're taught to be the nurturers, the carers, and we are, and we have to embrace that, but we have to also embrace that. We have to have care. And so we have to move from that space of thinking that thinking about your own care and your own support is selfish to reframing it as being selfish enough to be self preserving, because at the end of the day, if you are the caregiver and you burn yourself out. What's going to happen to that person? I don't think we think about that enough, and I don't think that that's a part of the narrative of care. Yes, you have to care about this other person, and yes, you have to give to that person, but if you're not there to give then what's going to happen if you hurt yourself and you're not there to care for that person, what will happen? And we have to get into that space of we have to start asking that question and making that a conscious part of what we do.

Rosanne 17:21

I love selfish enough to be self preserving. I think that's my favorite. I think I'm going to put that on a sticky. I mean, that is fantastic, and you're absolutely right. And we do lose sight of that because we don't want to be viewed as being selfish, and even in the providing of care and and we put so much energy and so much of ourselves outward that we lose that connection with ourselves. It's just gone. And that's part of that's what makes dementia caregiving so hard, caregiving in general, and dementia caregiving specifically, because of the constant change, and the constant change in your own emotions over everything. Because whether you had a good relationship with your who with your care partner or not, you're now in this you're now in this role, and whether you love them or you didn't love them, it's still that challenge of trying to navigate this, all of this, just waves of emotions and and confusion that come at you on a daily basis, and that's the part that really makes you feel off balanced.

Dr Sheri Yarbrough 18:32

Oh, absolutely. And one of the I'm glad that you're bringing up about not getting along with someone, yeah, dementia care journeys make you feel so out of control, and they make you feel like you have no choice, right? But you do have a choice. You don't have a choice about what's on the road, but you do have a choice in how you're going to navigate what's on the road, and so you do have a choice in how you're going to live this life of caring for someone with whom you've had a difficult relationship. And I always ask people you know when you're when you're facing that, think about this question, what are the memories you want to carry? Because at some point in time, this phase of your life is going to end, and what do you want to carry going forward? So you start putting those pieces in place in the moment. It's funny. I think that's the most ironic, but most important part of taking this dementia journey, it's learning to live in the moment, right? That's all my mom can do. She can't worry about her past. She can't can't plan for her future. Everything is right here, right now. Now, and so I encourage people, okay, what can you do right here, right now, in this moment, to create a little corner of something that's going to make the next moment manageable?

Rosanne 20:18

It's funny, because I know that it's it people will get caught up in you're not going to have them so. And you're not saying it in that way. You're not saying it in your journey is going to end. And you know, you need to embrace this now, and you should be grateful. And I don't, you should you should be grateful. You should be. You should be, and

there's a lot of that, and it's like, no, that's not what you're saying. What you're saying is you have to get it right in your own mind for yourself, so that you can move forward. When all is said and done, you can move forward and that it goes full circle with forgiveness, really,

Dr Sheri Yarbrough 21:01

Absolutely. Forgiveness is about healing. Things happened, and whether it happened 10 minutes ago or 10 years ago, you've gotten a moment since that time. And so it's about healing so that as you're moving forward, if the person should engage in a behavior that's always been very painful to you, learning to heal that space and forgive this person for having that characteristic, so that you can say you can make decisions on how you're going to shape your boundaries around that in order to be your best you for yourself, so that you can be your best person for that other person. Gotta heal, gotta heal, all of that stuff. And sometimes we carry things, sometimes we carry things from our past. We carry perspectives of ourselves from the past, and we also have to be patient and forgiving of ourselves for how we've created these narratives about ourselves and and I think sometimes when people are really struggling with how they see themselves, it makes it it makes them open to feeling that space of I've got to do this. I've got to show something else, and you wind up in that cycle of trying to do it all, all at once, all by yourself. You want to have it show the image that you've got the Superwoman cape on.

Rosanne 22:52

Right.

Dr Sheri Yarbrough 22:52

Hmmm, No, my Superwoman cape, went to Goodwill, and somebody else can wear that if they want. I'm not wearing it anymore.

Rosanne 23:05

Yeah, yeah, yeah, well, because it's and how do you try to do that while you're in the midst of being 10 years old or 12 years old, and you're taking care of your mother or your father, and they're what's coming out of their mouth is just transporting you right back to that. And it's every day. How can you try to parse through that and tease that out so that it's not, you know, it's not torture every day.

Dr Sheri Yarbrough 23:33

Exactly, and that, and that's where you have to have that really difficult answer, that difficult question, can I continue to live like this? And I think that one of the things that that we've we've shifted to in our world, as in our adult world, we stop asking questions when we're kids, we're flying we're firing off questions about every single thing, to the point where you know your parents are like, okay, just give me 10 minutes and I will answer questions, and I'll answer your questions in a half an hour. Just right now, right? And so we lose that ability to ask questions. And so when this caregiver thing comes, we roll into that checklist mode, and we're approaching it from that declaratory point of view. This has to be done, this has to be done, this has to be done. And then when you're in that space where the things that are coming out of your loved one's mouth is taking you back to when you were 12. You we it's like, Okay, I just have to suck it up and walk through it. And we don't ask ourselves, we don't tell ourselves, I don't like this. What? What do I need to do to live differently? Because I can't live like this anymore, and we don't give ourselves that validation to say I can't do it this way anymore. I remember saying that to someone. There's a beautiful line in the song fast car, you've got to make a decision, leave tonight or live and die this way. And I remember saying that to someone and having the person go, Well, I can't leave. No, I didn't say you were packing your bags and walking out the house, right? I'm saying that you have to choose whether you're going to continue living like you're living How are you going to do this differently? And the person wasn't ready to receive that eventually she got there. But we don't give ourselves, especially in those early years of when you're being this caregiver and you're you're giving and giving and giving and giving and giving that space to step back and say, Okay, I need to do it differently and to be okay with the fact that you have no clue as to what that means or how that's kind of look. And sometimes we have to embrace the reality that change comes not from what you know how to do, but what you don't know how to do.

Rosanne 26:24

Yes, and to be okay with the change. It's hard. Change is hard, right? Nobody wants anything to change, and dementia is full of changing, right? I mean, that's the only constant and life, yeah, I mean,

Dr Sheri Yarbrough 26:38

I mean life changes for heaven's sake. Yeah, I'm not 12 years old, with the only responsibility I had to do was clean my room so I could go out and ride my bike. Life changed, yep, and I was thinking about this too. I think that this with with dementia illnesses, we lose what I describe as normal behaviors in an abnormal context. The

context is what's abnormal, your loved ones, their moods, their preferences, their idiosyncrasies, the person, everything that made that person, that person is still there. You've just got this context in which their brain is changing and they're no longer able to access the best and most appropriate responses for what they're experiencing, right? So things go sideways all the time, and that context recognizing that no this is an abnormal context for life. Life is going to happen. It's going to unfold. No one knows what our future entails. You won't know your future until it becomes your present, and you're standing in the middle of it. And so we just have to understand that this is a an abnormal context, but everything else is still normal. Life changes. People change. We evolve. We're just doing this with this weird thing in the middle of it that prevents people from accessing their abilities to navigate that change.

Rosanne 28:14

You know, we spend so much time looking at what changed and what's lost and not what still remains that we can still tap into, and I think we get caught up in the well, they can't do this anymore, okay, but what can they do? So, you know, work with that.

Dr Sheri Yarbrough 28:32

It took me a long time to get there, and fortunately, over the years, some of the language around Alzheimer's disease has changed, but when we first engaged in this journey, there was all this focus on helping people understand where they are at these different stages. And so you look at the stages, and you'd have a thick paragraph of potential losses, because this is the disease that fits that Forest Gump, that line from Forest Gump Life is like a box of chocolates. You don't know what you're going to get. Nope, because in this disease, everyone doesn't get every symptom, and the symptoms that do present can vary in severity, so you what yours is gonna look like. So it's really important to understand, okay, this is going to look for us, like us. This is how ours is going to look. It may look fundamentally different from someone else's. May look similar in some ways, but different in others. But our journey, your journey, is going to look like you guys, right? And you have to accept this is our journey, and being comfortable with the fact that it looks the way it looks for you guys. There is no homogeneity. In this and I think that kind of going back to where I started in those early years. I was so focused on reading these, reading this stuff, to understand, what is she going to lose, what's she going to lose? I think after about a year, I was in information overload. And I Well, actually it was a little longer than that. I think it was after she got breast cancer, because now you've got a medication in the middle of this to fix one problem that could exacerbate the memory loss. And I was just like, I can't do it this

way anymore. I cannot continue to look for what she's could potentially lose. We're not living and the minute I stopped looking for what she was going to lose and really started focusing on what she could still do. Now I can breathe, because I'm not worried about what's going to happen. I can just address what's happening right here right now, and I can make a decision right here right now on how we're going to get through these moments, right and by doing making that as a lifestyle. Now I have my now I have my little brick path. Okay, these are the things that I can do, and now I can, just now I can. I've got something where I can start walking forward, because I know when I know what I'm experiencing, I'm at peace with what I'm experiencing, and now we can move forward with it. It's not going anywhere. So I may as well figure out how I'm going to carry this.

Rosanne 31:43

Right. Well, what were some of the things that helped you in that?

Dr Sheri Yarbrough 31:46

This is going to sound really strange and really simple, but it was one of the hardest things I had to do. I had to remember who we were.

Rosanne 31:55

Ahh.

Dr Sheri Yarbrough 31:56

I had to remember the whole people, yeah, not just this thing, not just the Alzheimer's dementia, but who are we? What do we like to do? Where do we want to go? How do we do this? And so in the early years, going to the grocery store together, and the store that we go was produce market, and they always had such beautiful produce, and my mom would want to put everything in the basket, and so we had to make a little rule that you get one thing off the list per store. Okay, so if you put those apples in the basket and we didn't have apples on the list, then that's your thing. So are you sure that's what you want? And so remembering who we were, she loves food. I love food. So as not to spend, you know, 40 extra dollars, maybe 10 extra, but not 40. We set those boundaries of what's the one thing that what's your one thing off the list, okay? And so it was remembering who we were. Yeah, you're having this sleepless night. Okay, what are we going to do tomorrow to burn off that restless energy and in remembering who we were, she was always very active. She always liked to be outside. So, okay, we got a warm Chicago winter day. It's 40 degrees, all right, we go

outside. As tired as I am, I'm gonna have to figure out where we can go outside to get that energy, to expend that energy, so that she can fall asleep, right? And so again, remembering who we were.

Rosanne 33:40

Yeah, I love that. I love that because it also removes that, that tragic narrative that we can get sucked into, the one, the one that really, it really disturbs me, and I understand where it comes from, but the they're not there anymore. It really disturbs me, because we know better than that. You see the eye roll. I saw your face. I did see your face. Yep, you know what I mean. It's that's not true. It's just that we want them to be something that they can't be, and we need to, we need to join them where they are. They're still there.

Dr Sheri Yarbrough 34:16

Exactly. And I think that you hear that narrative a lot, because it comes from that space of when people did have a good relationship. My mom was always there for me. She was my best friend. My dad was my rock. I could always depend on him. And when this illness arrives and it changes how this person is engaging with you. It's scary because you don't know where it's going to go, and unfortunately, too many of the narratives around dementia journeys really focus on the loss, and you don't hear this. Hear enough stories about the. Um, no, Dad couldn't. He couldn't go to the park with me the way we used to. No, he couldn't go to the park and play baseball anymore, but he could go to the park and enjoy watching the Little League game, right? And so it's like allowing the relationship to evolve. Still do what you know, still do what the person looked like doing, but you just have to modify it to fit where they are at this point.

Rosanne 35:33

Right? And it's hard to try to do that in the midst of your own heartbreak and your own grief over what you've what you're losing, and the relationship that you're losing and all of that. But, you know, it always comes back to we're not just one thing, right? And we wouldn't want to be judged as being one thing. And our people are not just one thing, and we have to be with them in whatever way they are, as hard as it is and it's hard, you know, we're not saying it's an easy thing to do. It's hard, and you have to continually be on your toes and continually be monitoring the changes, but they're still there.

Dr Sheri Yarbrough 36:12

Exactly. And I remember having a friend, her mom had had Alzheimer's dementia, and she talked about, we were talking about medications. This was 14 years ago, and she said, You want to make sure that they get her medications right, so that she can stay at a higher level. And I understood what she was saying to me, but it was in that moment that I had to stop and ask, well, for whom am I doing this? Is it for her, or is it for me? And if I keep her at a higher level, but she's not living, living well, despite this, this, this dementia, am I really, am I really doing the right thing, right? And so in that so, yes, I understand. But again, going back to what I said earlier, about we have to move out of that declarative space and start asking questions. What's going to be good for both of us, and if you do those things that keep it a higher level, but she's really not functioning well. When this is over, are you going to be able to look at the how are you going to be able to live with that? Because I'm sure you've talked to people who, after the journey, are so wracked with the would have, should have, could have regret, rocks in their life, backpack.

Rosanne 37:47

Yes, ma'am.

Dr Sheri Yarbrough 37:47

I think I made it up early in, early in this that I just decided I didn't want to, I didn't want to walk with regret. Yeah, I didn't want that. And so it's important for you to say, I don't want that. I don't like living this, this way. I have to do something different. I don't want that. It's okay. It's okay to say what you don't want, right? And that is so hard, I think for a lot of people, I guess it was a little easier for me, because I've always been a little bit spoiled, and I think my dad recognized in me as a little kid that I had the real potential to be a brat. So and so he helped me understand that spoiled get what you want thing, but in a healthy way, got you so I think it was easier for me to kind of embrace that, because I was that was kind of always under the surface. But yeah, it is okay to say that. I don't want to live that way. I don't want to do it that way. I can't go that far. It's okay because if that's what you need in order to figure out how to best care for both of you, that's what you need.

Rosanne 39:07

There's a lot of acceptance that has to happen across the board, and part of that is what you're what exactly what you're saying. It's okay.

Dr Sheri Yarbrough 39:15

It's okay to be selfish enough to be self preserving, because at the end of the day, if you give all this out, if you give yourself 100% and you give out, and you're on the floor in a pool of gelatin, you turn to a pool of melted jello. Who's going to care for this person? It's so hard to accept Yes, and they want to argue with you when they're not at the acceptance point, they'll argue with you. It's like, Uh huh. Think about what you're saying. Listen to what you're saying.

Rosanne 39:48

Well, like, in what way, what would they say to you?

Dr Sheri Yarbrough 39:50

I've had people tell me, yeah, but you make it sound so easy, yeah, but that's not that's not always. Possible, yeah, well, that's true, but you know, I've just got to do what I've got to do. Yeah, you do. And you said a word earlier, a little bit ago, which is one of the words that I avoid. Using the two words I avoid easier and better. I avoid better, because it sets you up to think that if you perform a set of tasks in a certain way, and you behave in according, in accordance to a certain standard, that things are going to change in a way that you're no longer going to be required to extend the care that you're having to extend. Right? It ain't going to get better. Just don't get better. Okay? And easier, I avoid because this is a fundamentally difficult. Caring for someone is fundamentally difficult. So why would you think that something that's fundamentally difficult is at some point going to be easy, right? So again, going back to those, really, as we used to say, Mother wit questions, and allowing ourselves to hear the fallacies, some of the narratives that surround caregiving, and to just say, okay, okay, well, all right, that's your opinion, but something that's fundamentally difficult will never be easy, regardless of what I do.

Rosanne 41:30

Yes.

Dr Sheri Yarbrough 41:31

It just ain't.

Rosanne 41:32

It can't.

Dr Sheri Yarbrough 41:34

And like I said, It just ain't, just one of those words that my mom hated, but I love because it's one of those shut down words. Shuts down all that narrative. Ain't happening, ain't gonna get easier, ain't gonna get better, yeah, shuts all that down so that you can start looking at, okay, well, if it's not going to be easy, what is it? Can make it manageable. We can make this functional. We can take actions that are feasible, but they're still challenging, and the challenge is still there. We're just navigating the challenge a little differently.

Rosanne 42:14

So if a dementia caregiver came to you and said, you know this isn't working for me, I can feel myself getting further away from myself, and I don't know how to keep this up. I don't know how to keep going. What advice would you give to them?

Dr Sheri Yarbrough 42:28

First thing I would say is, number one, be patient with yourself. No, you're not going you're not going to know, but be patient in that space. Two, be honest with yourself. Do not talk yourself into thinking that it's going to be different without you defining what different means for you, because we sometimes do that. We talk ourselves into stuff,

Rosanne 42:56

Yep, yep, yes, we do.

Dr Sheri Yarbrough 42:59

We don't think about ourselves in this we're so busy giving to others that we're not giving to ourselves. Yeah, we have to do that so that it becomes that lifestyle. You know, everybody's talking about self care, well, okay, yeah, fine. That's another one of those overused term, but self care is about making sure that you are extending the same kind of care to yourself that you are extending to other. It is not a set of tasks like going out and having a lovely lunch with somebody and getting your nails done, but that can be part of it. Has to be a mindset where you believe, where you accept, where you expect, care for yourself, so that you can continue caring and honor what you honor yourself, honor what you do. Give it value, yes, it's messy, but value it in a way that you can figure out, okay, how am I going to disentangle all of this, this messiness, and give yourself respect for most of us? I think that you have to shift the golden rule from doing unto others as you would have them do unto you, to do unto yourself as you are doing for others.

Rosanne 44:26

A big thank you to Dr Sheri Yarbrough for being my guest today. For more information on Dr Yarborough her book, or how to connect with her, visit praxisforcare.com I hope you enjoyed our podcast today, head over to Daughterhood.org and click on the podcast section for show notes, including the full transcript and links to any resources and information from today's episode. You can find and review us on Apple podcasts or anywhere you listen to your podcasts. We are also on Facebook, Twitter and Instagram at Daughterhood, the Podcast. Feel free to leave me a message and let me know what issues you may be facing and would like to hear more about, or even if you just want to say hi, I'd love to hear from you. Also a very special thank you to Susan Rowe for our theme music, the instrumental version of her beautiful song, Mama's Eyes from her album, Lessons in Love. I hope you found what you were looking for today, information, inspiration, or even just a little company. This is Rosanne Corcoran. I hope you'll join me next time in Daughterhood.