Week 8

 **model#1**

It is a lovely and thoughtful documentary, recording the caregiving career of Deborah. She is a dutiful daughter, taking good care of her mother, who is diagnosed with Alzheimer’s. Her mother has already developed symptoms of Alzheimer’s disease through the beginning of caring process. The onset of Alzheimer’s disease is often slow and involves subtle changes. One of the early signs of Alzheimer’s, which also occurs in many aging individuals without this disorder, is the loss of short-term memory. However, Alzheimer’s patients forget permanently, whereas aging adults with normal memory loss may forget only temporarily. For example, Deborah’s mother cannot remember going to dentists. And she just remembered her childhood and early adulthood, while she forgot the time with her husband, daughter, and son. Other signs of Alzheimer’s are repetition and confusion. As shown in video, Deborah’s mother may ask the same question over and over or confuse day and night. Memory loss slowly progresses until the individual is unable to perform daily activities such as dressing and bathing. Alzheimer’s patients may also exhibit dramatic personality changes. For example, Deborah’s mother was upset her daughter is a gay, but after her illness, she started to accept her gay identity. Or people who were once outgoing and personable may become withdrawn and verbally or physically aggressive. All those changes are particularly affecting on family relationships. On the one hand, those changes may improve the connection and understanding between family members, like Deborah and her mother. On the other hand, those changes would disturb their caregivers and can place great stress on family members. Family members often feel sorrow because they have lost the person they once knew.

In fact, adult children often care for their aging parents. Adult child caregivers experience even higher levels of stress and report more depressive symptoms than other relatives or friends. That is because they are living in the same household and typically devote more hours to caregiving. They also have fewer opportunities to get re- lief from their caregiving duties (Pinquart & Sorensen, 2003). Like Deborah, she very love her mother, but she felt so painful when she supported her Alzheimer’s mother for a long time. Besides, she didn’t feel relieved when her mother just moved in nursing home , because she was afraid her mother was unhappy to live there. It is a suffering process for both of them. Actually, sending aging people with Alzheimer’s or other dementia to a good nursing home is a not bad choice for both patients and their families, because they can receive more professional and considerate care there, most of patients would feel happy and relax there. Moreover, family members’ stress can be ameliorated.

Caregivers of the frail elderly experience many costs, especially when taking care of aging parents with Alzheimer’s or other dementia (Knight et al., 2002). There are emotional strains, there is the loss of a familiar lifestyle that comes with greater confinement, and there are disrupted plans. The unbalance between working and caring tasks that many caregivers have to (Chen, 2014). Yet there are also positive aspects associated with caregiving; many caregivers derive satisfaction from fulfilling the needs of a loved one. However, most research has concentrated on the psychological costs of caregiving, not on the rewards.

Model #2

Caregiving

Due to the increasing aging population and limited resources(i.e. Health care resources), the caregiver burden tends to be higher than before, especially the economical burden, etc(Chen, 2014). And according to Caregiving Distress Model, more caregiver burden will produce more stress, thus might lead to depression, perceived health and anxiety, which are relatively negative ones(Mitrani, et. al., 2006). Therefore, to deal with the caregiver burden should be considered as important.

After watching the video Complaints of a Dutiful Daughter, one idea comes into my mind -- hiring family member as caregiver to take care of their older family members. To be honest, it is a good way to hire family members to provide home care services since family members could always know the true demands of their aged generations. Additionally, considering of resources, if one certain family owns some basic health care equipment(i.e. Blood pressure monitor, etc), it could save more resources for the society(i.e. Hospital, etc). However, it would be not really rational in other dimensions.

In terms of professional skills, family member caregiver would be somewhat limited since most of them are probably not medical trained. In other words, family members could not offer professional cares to their aged folks. On the other hand, the public already has Medicaid, Medicare, etc, which could offer great health care services. The existence of family member care giver would increase the financial burden of the government since the budget is not really flexible and enough. And the additional expenditure of family member care giver system would increase the burden of socio-economics because the tax would be the giant head of fiscal income which are gathered mostly from the citizens. What should be considered as well is the labor market. Since there are many professional care givers who should be chosen as an in-home service provider in the labor market. If the family members are chosen to be the ones to substitute those care givers, the rate of unemployment would increase rapidly in some aspects, which is not a good sign for domestic economics.

To deal with this caregiver issue, I think that those family member caregivers could be trained by government and relative professional nursing home to improve their professional skills. Considering their payment, it could be partly considered both by the family and the fiscal system(i.e. Social welfare system).