Professional Caregiving and Our Own Families

The Prophet Without Honor

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for Aging
Resources and
Education

USING POLL EVERYWHERE

- Participate and hear from each other
- Two ways to join
 - TEXT tmermelstein305 to 22333
 - Go to pollev.com/tmermelstein305



THE OBLIGATORY

Today's Goals

- Demonstrate the challenges of caring for aging loved ones (with some help from the audience)
- Propose remedial actions to be taken in caring for our own loved ones and review ethical codes from a variety of fields for guidance in how to handle blending lines between family members and clients

THE OBLIGATORY

Today's Goals

- Invite attendees to consider:
 - Their own biases in addressing the ways we care for families
 - How to address conflicting findings in blended personal and professional situations
- Create a safe space where we can support one another

Neither presenter has any conflicts to disclose.

A CONFESSION

- Tammy's story
- Peggy's story

WE MAY WEAR MANY HATS

- Subject matter expert
- Referral source
- Care manager/coordinator
- Problem solver
- Errand person
- Physical caregiver
- Punching bag

CAREGIVING BACKGROUND

- 1 in 5 adults provide care for another adult with health needs and/or functional challenges (locally 1 in 4)
- 90% of care is performed by family caregivers
- 61% female; 39% male
- 61% also work outside the home, with the average caregiver working full-time

Have you provided care to a loved one with health or other challenges?

Yes

No, but I expect you in the next couple years

No, and I do not expect to in the next couple years

What are some of the experiences you have had or challenges you have faced caring for a loved one?

□ When poll is active, respond at pollev.com/tmermelstein305
□ Text TMERMELSTEIN305 to 22333 once to join

If you provide care, do or did you feel that the care recipient respected your expertise?

Yes

No

Sometimes/depends on the situation

If you provide care, do or did you feel that other family members respected your expertise?

Yes

No

Sometimes/depends on the situation

What are some of the experiences you have had or challenges you have faced caring for a loved one?

PEER EXPERIENCES

- I felt like a failure/hypocrite...
- If it is this hard for me, what is it easlly like for others?
- Knowing too much versus too little frustration either way
- Why can't <insert name here> just listen?
- You don't know what you are talking about/you're the expert, why can't you do the impossible?

SURVEYING THE FIELD

Understanding Our Ethical Obligations through Others' Framework

IN OTHER PROFESSIONS

- Physicians/medical personnel: should not treat oneself or members of immediate family (AMA)
- Attorneys: can represent family so long as there is no conflict of interest (ABA)
 - Attorney should not represent a client if that attorney's interests could conflict but the client can choose to ignore concerns
 - An attorney who represents himself has a fool for a client

IN HELPING PROFESSIONS

- Social workers (NASW) and counselors (ACA)
 - Observe issues of power differential
 - Refer when objectivity is challenges
 - Code of Ethics specifically recognizes dual or multiple relationship roles
 - Social workers should not engage in dual or multiple relationships...[when] there is risk of exploitation or potential harm...
 - BUT if/when it happens, protect your client with clear boundaries
 - Client interests are primary

IN HELPING PROFESSIONS

- Social workers (NASW) and counselors (ACA)
 - ACA used to prohibit treating family but has changed to permit it if the counselor can remain objective
 - Some organizations enforce stricter standards
 - Ex. Kaiser Permanente holds counselors to physician standards with regard to this issue

What are some of the core differences or distinctions between these code of ethics approaches?

SOME CORE DIFFERENCES

Similarities

- Role of objectivity and effects of clouded judgement
- Differences
 - Attention paid to potential issues related to family
 - More absolute vs. more relative
 - Unspoken expectations
 - Power dynamic and role of consent

What do you do when either you and the care recipient or you and other family members disagree on the best course of action?

Top

WHAT WE HAVE DONE

- Encouraged research
- Remembered that "Being Old Doesn't Mean You Lose the Right to Make Bad Decisions"
- Analyzed own biases
- Embraced self-determination when possible

WHAT WE HAVE DONE

- Tried to establish boundaries
- Recognized our own (and systemic) limitations
- Redirected frustrations into making change

WE ARE IN A UNIQUE POSITION

Professional or self-expectation to help Vs.

Unique challenges from knowledge and training

TAKE A STEP BACK

- Remember why you went into this field
- Treat your loved one as a client (self-determination)
- Choose the role(s) that work best for you and for your family
- Set reasonable expectations for yourself and your loved ones&

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