

CHURCH RESPITE CARE

Our Church Cares

Who have you noticed who has not been to Sunday School, your section at church, choir, your small group or Wednesday dinners in awhile? It takes intentionality to “write” those names down whom God “writes” on your heart – and call within 24 hours to check on them.

What is going on in the personal life of absentee members that may be hindering their attending? Occasionally there has been a health crisis that demands 24/7 care of the spouse or loved one. This can be overwhelming, and the primary caregiver may have no energy left to call others and update them. They need someone to talk to and perhaps someone who will volunteer to help carry their load: laundry, meals, shopping, housekeeping or companionship for their loved one while they run errands. We call this “respite care,” meaning you relieve a family member or friend for a few hours a day or a few hours a week from some of their commitments to give them a break, some rest or time to get other errands done or even to do something fun and different to reduce the stress and anxiety of their everyday responsibilities and burdens. Respite provides peace of mind for the primary caregiver and helps to preserve their mental health as well.

Respite care has increased in popularity and need as seniors are living longer, remaining healthy longer and wanting to remain in their homes longer, which may also be a more cost-effective alternative for many. Respite care is flexible and fits the needs of the individuals involved.

Through offering a non-medical church respite outreach grounded in love, churches help meet an immediate need for spouses or primary caregivers while providing church members an opportunity to meaningfully serve others while forming connections with families who, because of their situation, may feel disconnected or forgotten by their church family.

What Services Do Non-medical Church Respite Volunteers Offer?

In-home non-medical church respite can include, but is not limited to:

- **Homemaker services** like providing meal prep, shopping and housekeeping;
- **Companionship** providing exactly that. They get to know the loved one, play games, laugh, share stories, go for walks, do PT exercises together, read & discuss a short devotional, pray, sing hymns and other forms of companionship.

An important part of respite care is providing one-on-one attention and care for the loved one's social, spiritual and significance needs. Physical needs are also important and helpful for even those suffering with dementia and/or anxiety.

Respite Care for Alzheimer's beyond the volunteer

Taking care of a loved one with Alzheimer's 24/7 is draining. Depending on its level of advancement, respite care may require professional in-home or short stay in a care facility. Let the primary caregiver know these options are available within the community. There are day programs which provide a safe and secure location in a controlled environment. The same level of care is available for inhome respite care too. Care can come from a home care provider with licensed nursing services or from home care works, such as a home health aide. Shift time can vary too and are arranged to fit the families schedule. Some care is provided [as live-in care](#) so that their loved one has the same caregiver for a certain number of days or shifts. Contacting the local Alzheimer's Association is a great place to start/suggest to the family.

Offering respite, despite the church's best intentions, is often declined by the family at first. Keep trying. If you can appreciate what the family may be feeling, you will be in a better position to minister to them. Sometimes a family member may experience one or more of the following emotions:

- The Martyr Complex. "This is my problem. I'll deal with it myself."
- "I feel unworthy of receiving help."
- Pride. "I do not need anyone's help."
- They fear that quality care will not be provided.

Whatever the situation, be patient and try to help the family sort through their feelings. Be ready with the answers to each of these objections. Remind the family that it is God's will for us to serve one another. By refusing help, they may be denying someone else their opportunity to serve as Aaron and Hur did with Moses in Exodus 17:8-16.

Caregiving STATISTICS

The following are just a few facts that support the need for a respite ministry.

There are more than 50 million people in the United States caring for loved ones 18 years of age or older. And there are at least another 10 million caring for loved ones with special needs, younger than 18.

Source: The National Family Caregivers Association's website provides further interesting statistics at <https://www.thefamilycaregiver.org> Go to the site to view their complete list.

Elderly spousal caregivers with a history of chronic illness themselves who are experiencing caregiving related stress have a 63% higher mortality rate than their noncaregiving peers.

Source: Schulz, R. and Beach, S. R., Caregiving as a Risk Factor for Mortality: The Caregiver Health Effects Study. Journal of the American Medical Association, Vol. 282, No. 23, December 15, 1999.

Stress of family caregiving for persons with dementia has been shown to impact a person's immune system for up to three years after their caregiving ends thus increasing their chances of developing a chronic illness themselves.

Source: Drs. Janice-Kiecolt Glaser and Ronald Glaser, "Chronic stress and age-related increases in the proinflammatory cytokine IL-6." Proceedings of the National Academy of Sciences, June 30, 2003.

Family caregivers who provide care 36 or more hours weekly are more likely than noncaregivers to experience symptoms of depression or anxiety. For spouses the rate is six times higher; for those caring for a parent the rate is twice as high.

Source: Cannuscio, C.C., C. Jones, I. Kawachi, G.A. Colditz, L. Berkman and E. Rimm, "Reverberation of family illness: A longitudinal assessment of informal caregiver and mental health status in the nurses' health study." American Journal of Public Health 92:305-1311, 2002.

A wife's hospitalization increased her husband's chances of dying within a month by 35%. A husband's hospitalization boosted his wife's mortality risk by 44%.

Source: Nicholas D. Christakis, Professor, Health-care Policy, Harvard Medical School, Boston and Suzanne Salamon, M.D., Associate Chief, Geriatric Psychiatry, Beth Israel Deaconess Hospital, Boston, New England Journal of Medicine, Feb. 16, 2006.

Family caregivers experiencing extreme stress have been shown to age prematurely. This level of stress can take as much as 10 years off a family caregiver's life.

Source: Arno, Peter S., "Economic Value of Informal Caregiving," presented at the Care Coordination and the Caregiving Forum, Dept. of Veterans Affairs, NIH, Bethesda, MD, January 25-27, 2006.

Family caregivers report having a chronic condition at more than twice the rate of noncaregivers.

Source: Health and Human Services, Informal Caregiving: Compassion in Action. Washington, DC: Department of Health and Human Services. Based on data from the

National Survey of Families and Households (NSFH), 1998 and the National Family Caregivers Association, Random Sample Survey of Family Caregivers, Summer 2000, Unpublished and National Alliance for Caregiving and AARP, Caregiving in the U.S., 2004.

The value of family caregiving to society is estimated at \$306 billion per year—more than the value of home care and nursing home care combined.

Source: Gail Hunt, president and CEO of the National Alliance for Caregiving, 2007.

Close to two in three caregivers in the U.S. are employed, either full or part-time. Source: Gail Hunt, president and CEO of the National Alliance for Caregiving, 2007.

Approximately 40% of those caring for a family member also have children under the age of 18 and men now represent 40% of all caregivers.

Source: Gail Hunt, president and CEO of the National Alliance for Caregiving, 2007.

Caregiver Resources

National Alliance for Caregiving: Caregiving Tips web site brochure <http://www.caregiving.org/>

<https://www.healthinaging.org/aging-and-health-a-to-z/topic:caregiver-health/resource:toolsand-tips/>

The American Geriatrics Society: The AGS Foundation for Health in Aging's Tips for Avoiding Caregiver Burnout <http://www.healthinaging.org/>

BIBLICAL EXAMPLE – Exodus 17:8-16

Exodus 4 shows us that from the beginning of his call, God advised Moses to accept the help of others in his mission. Moses was told to use Aaron to speak for him, and in 18 to appoint leaders to help carry the load. Moses needed helping hands to support him when he grew weary. In his time of need he welcomed the support of those around him. Respite care is one way we can emulate the actions of Aaron and Hur. Respite provides helping hands to those who routinely care for family members.