

COPING WITH A RESISTANT PARENT

http://www.seniorlink.com/articles/A12_N3_Resistance.html (The author, Brian Merrick, is a Seniorlink care manager based in Boston, MA. He is a licensed clinical social worker with 25 years of experience working with older people and their families.)

A very high percentage of the situations referred to geriatric care managers begin something like this: "Our mother doesn't seem to be taking good care of herself, yet she rejects everything we try to do to help. She doesn't want any strangers coming into her home and she refuses to consider a move to assisted living. We've tried everything we can think of to convince her, but she is stubborn and insists on continuing to handle things her own way. We're very frustrated and upset that she has rejected our efforts to make her life better. What can we do?"

It's only natural that most adult children feel a sense of responsibility for their aging parents and want to do their best to make sure that parents are receiving adequate care. One common motivating factor is a feeling of wanting to reciprocate for the care they received as children.

Because it feels so natural to want to provide for aging parents, children assume that it should feel just as natural for their parents to accept help as they become less able to manage on their own. It can seem puzzling and unreasonable when this turns out not to be the case. Feelings of frustration, rejection and anger often result. These emotions are exacerbated by ongoing worry about parents who are not taking care of themselves and, therefore, remain at risk for serious, adverse consequences. This situation can worsen if ongoing arguments ensue, causing both parents and adult children to become entrenched in their positions and making the possibility of a compromise ever more remote.

WHERE RESISTANCE COMES FROM

In order to gain greater insight into the phenomenon of resistance, it might be helpful for younger family members to take a step back from the surface, common-sense

assumptions. Try to imagine what accepting care may feel like for an older person.

This is a challenge because none of us finds it easy to imagine a time when we might not be able to manage independently. It may make us uncomfortable to see ourselves as old. An elderly person may “resist,” first and foremost, because she or he is still in this mindset. Although there may be obvious and objective evidence that your parent requires help, accepting it constitutes a significant change in one’s relationship to the world: “I am no longer able to manage on my own. I have to rely on others.”

Denial - The denial of problems, a common component of resistance, can be a coping mechanism that, although flawed in terms of ultimate effectiveness, constitutes a desperate attempt to maintain autonomy. Your parent may have irrational fears that accepting help could be the first step towards losing control of everything—the beginning of the end, so to speak. In the face of many losses, including declining health, decreased income and the death of friends, elderly people struggle to hold on to some sense of their lives as they’ve always lived them. The inability to manage on one’s own can be a significant loss and a major blow to self esteem.

Personality traits - The behavioral manifestations of resistance can be more problematic if the elderly person has a life-long history of being “fiercely independent” or stubborn. There is no reason to believe that such traits diminish with age. A change in the level of their autonomy can be even more threatening to such an individual.

Family roles and hierarchy – “Once a parent, always a parent” is a feeling maintained throughout life which can add to an elderly person’s resistance to becoming dependent on their children. Accepting help might be interpreted as unacceptable role reversal. Also, if the relationship between a parent and child always has been difficult, the dialogue and

negotiations around changing roles can be fraught with intense power struggles. These tensions can be difficult to resolve without mediation.

DEALING WITH RESISTANCE

Most importantly, these issues must be dealt with gingerly and with sensitivity, always respecting and supporting the wish for the maximal level of autonomy possible. Rather than saying to your parent: "We're going to arrange home care services to help you out. Isn't that great?" Try this instead: "We know this must be very difficult for you and we wouldn't be suggesting help if we didn't think it's the best way to keep you independent for as long as possible."

Stress to your parent that you are not trying to take control away. This isn't about putting a big, involved plan into effect, but rather taking a few small steps to make things better. Add that any plan can be adjusted as needed and is not set in stone. It may be necessary to break the discussion down into several sessions so as not to make it overwhelming.

As long as a parent's mental status is not compromised, you must remember that she or he has the right to make what you consider to be bad decisions. It may be that your parent needs time to adjust to the idea of care. Some sort of crisis may have to occur to persuade them otherwise. If you find yourself obsessed with convincing your parent and worrying excessively, it may be time to seek some assistance for yourself to help you let go.

If your parent is experiencing signs of confusion and/or memory loss, however, they may not have the capacity to make responsible decisions. A geriatric care manager can help you determine whether your parent's decision-making ability is impaired. He or she likely will recommend a formal evaluation by the senior's primary care doctor, perhaps in conjunction with a neurologist or neuropsychologist. If a formal diagnosis of

dementia is the result, your parent no longer retains the ultimate say about the type of care he or she will accept.

No matter how difficult it may be, your responsibility at that point is to take the role of substitute decision-maker. You must do your best to put a plan in place that will ensure your parent's safety—always remembering the principle of the “least restrictive alternative.” Substitute decision-making also may be indicated in situations where a psychological issue, such as major depression, is clouding judgment.

It can be helpful to engage a geriatric care manager to approach your parents about a care plan. Sometimes, it is easier for someone outside the family to broach these issues, especially a professional with extensive experience talking with older people, including those suffering from dementia, about difficult changes in their lives.