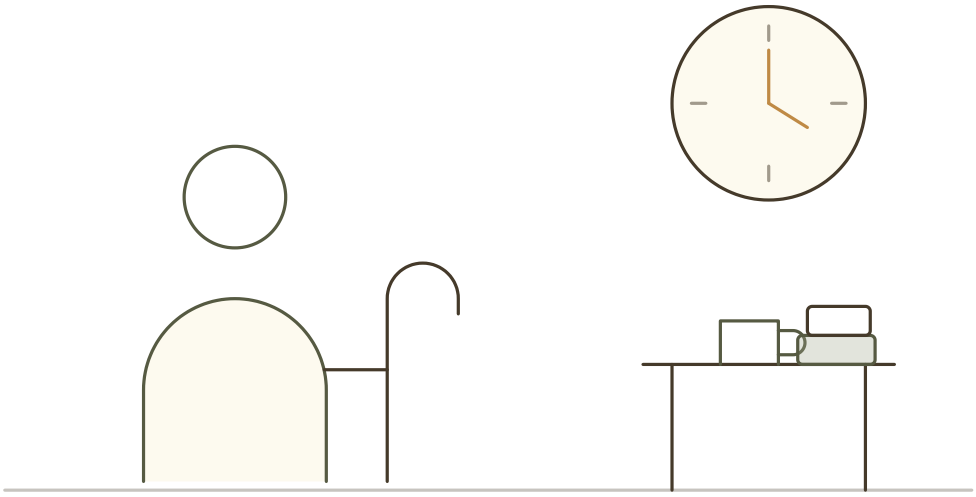
PSIRA
INSTITUT DE PSICOLOGIA I SALUT INTEGRAL



Caring for the carer

A practical guide for family members looking after an older person: how to spot carer strain, share the load as a family and know when to ask for help.

For family members caring for an older person with memory loss, dependency or frailty · 8 min read

Institut PSIRA team

Institut PSIRA
c/ Marquès de Caldes de Montbui, 123
17003 Girona

Appointments and questions
WhatsApp +34 621 404 235
info@institutpsira.com

Web version
institutpsira.com/en/guies/cuidar-qui-cuida

Looking after an ageing parent, partner or grandparent usually starts gradually: a lift to the doctor's, the weekly shop, a phone call every evening. Over time, if forgetfulness, disorientation or dependency set in, caring can take up much of your day and most of your headspace, often without anyone ever having decided it would.

This guide is for you, the carer. It won't tell you how things should be done, because every family is different. Instead, it suggests practical ways to check how you're doing, organise the work with the rest of the family and recognise when it's worth getting professional support. You can read it from start to finish or go straight to the section you need today.

Signs the load is getting too heavy

Carer strain doesn't arrive all at once. It builds up, and carers are often the last to notice, because their attention is on the other person. Some signs worth taking seriously:

- [ ] You feel tired even after sleeping, or you sleep badly because you're on alert at night.
- [ ] It's been weeks since you did anything just for yourself: a walk, a coffee with a friend, some time to read.
- [ ] You snap easily, at the person you care for or at others, and then feel guilty.
- [ ] You feel that everything depends on you and that if you slip up, it will all fall apart.
- [ ] You've stopped seeing friends or going to places you used to enjoy, for lack of time or energy.
- [ ] You find it hard to concentrate at work, or you forget things of your own.
- [ ] You have physical complaints you didn't have before, such as back pain, headaches or stomach trouble, and you haven't had them checked.
- [ ] You cry more than usual, or the opposite: you feel flat and switched off.
- [ ] Sometimes you wish it would all be over, and that thought frightens or shames you.

Ticking some of these doesn't mean you're doing it wrong. It means you're making a big, sustained effort, and your body and mood are feeling it. That's useful information when deciding what to change.

A self-care checklist you can actually stick to

Self-care advice often seems written for people with plenty of free time. Here's a short, realistic list. You don't need to do everything: pick two or three for this week and review them next week.

- [ ] I have at least one regular slot a week that's mine, however short, and someone to cover for me.
- [ ] I sit down to eat at least once a day, without doing anything else at the same time.
- [ ] I talk to someone I trust about how I'm doing, not just about the person I care for.
- [ ] I keep my own medical appointments and don't put them off for lack of time.
- [ ] I go out for a walk or some fresh air, even if it's only fifteen minutes.
- [ ] I've written down what helps me when I'm exhausted, so I have it to hand.
- [ ] I accept help when it's offered, even if people don't do things exactly my way.
- [ ] I allow myself not to have everything under control.

Looking after yourself isn't self-indulgent or selfish. If you go down, the care of the older person suffers too. Seeing it that way can take some of the guilt out of those moments.

Getting organised and sharing the load

Care often falls to one person because they live closest, have the most flexible hours or simply started first. Sharing the load doesn't mean everyone does the same; it means each person takes on something specific. These steps can help:

1. **List everything that gets done**
   For a week or two, write down every task: medication, appointments, shopping, meals, personal care, paperwork, bills, phone calls, company, nights. A lot of the work is invisible until it's written down.
2. **Sort the tasks**
   Separate what has to be done in person from what can be done remotely (paperwork, banking, booking appointments, phone calls), and daily tasks from occasional ones. That way, relatives who live further away can take on real tasks too.
3. **Call a family meeting**
   Find a calm moment, without the older person there if the conversation might be difficult. Bring the list. Explain how you're doing without blaming anyone: "I'm doing almost all of it and I can't carry on like this" works better than "You lot don't do anything".
4. **Assign specific tasks, with a name and a day**
   "Helping out more" isn't a task. "Marta takes Dad to the doctor's on Tuesdays" and "Jordi deals with the bank paperwork" are. Write it down somewhere everyone can see.
5. **Plan for cover and emergencies**
   Agree who steps in if the main carer falls ill or needs a few days' rest, and where the important information is kept: medication, phone numbers, reports and the doctor's details.

6 **Review it regularly**

Needs change. Set a date to talk again, say in a month or two, and adjust the arrangement depending on how it's gone.

Talking about it: with the older person and with your siblings

With the person you care for, try to speak to them as the adult they are. If there's memory loss, short sentences, one idea at a time, help more than long explanations. Avoid arguing about what they do or don't remember: it's often better to steer the conversation elsewhere than to prove them wrong. Whenever possible, let them make small decisions, such as what to eat or what to wear; protecting their independence, even in small things, is part of caring for them.

When bigger decisions come up, such as moving home, bringing in paid help or sorting out legal matters, it's best to plan ahead and, if possible, while the person can still have their say. That avoids decisions being rushed in the middle of a crisis.

With siblings and other relatives, conversations about care often stir up old issues. A few ideas to keep them from going wrong:

- Talk about facts and tasks, not about who loves whom more or who did what years ago.
- Ask for specific, manageable things rather than expecting others to guess what you need.
- Accept that people can help in different ways: with time, with admin, with money or with company.
- If conversations always end in an argument, it can help to have someone from outside the family to keep them on track.

Questions to ask the professionals

At appointments with the doctor, neurologist or psychologist, nerves can make you forget things. Take your questions written down and note the answers. Some that may be useful:

- ? What exactly is happening, and how might it develop over the coming months?
- ? Which changes in behaviour or memory are to be expected, and which should make us get in touch straight away?
- ? Is there an assessment that would help us understand their situation better?
- ? What can we do at home to maintain their independence and abilities?
- ? Are there cognitive stimulation activities that might suit them?
- ? Who should we call if we have questions between appointments?

? Which legal or care-needs matters should we start looking into now?

? Is there support for us, the family, and where can we find it?

If you have a neurology report or referral, bring it with you. If you don't, that's fine: ask how the process works and who can advise you.

When to seek psychological support

You don't have to reach breaking point to ask for help. Talking to a psychologist can be useful when:

- You've ticked several signs on the first list and it's been going on for weeks.
- Sadness, anxiety or irritability are affecting your daily life, your work or your relationships.
- You feel constant guilt, whatever you decide.
- There are family conflicts you can't seem to resolve.
- You need to prepare for a major change, such as a care home, a diagnosis or the loss of the person you care for.
- You want to understand what's happening, for example what dementia is or why behaviour changes, so you know how to respond.

Support can be one-to-one, so you have a space that's just yours, or in a group, with others in similar situations. Talks and workshops for families also offer information and tools to understand the process and feel less lost.

> **If it's urgent**
>
> If you or the person you care for are in danger, or you're having thoughts of harming yourself or ending your life, don't wait for an appointment. Call 112. You can also call 024, the Spanish suicide prevention helpline, which is free and available 24 hours a day.

At Institut PSIRA, the Older Adults and Neuropsychology Unit provides psychological and neuropsychological care, assessment and support for older people, as well as support for their families and carers, one-to-one and in groups, with talks and workshops. If you'd like to talk it through, you can book an appointment on Doctoralia or message us on WhatsApp at +34 621 404 235. We're at c/ Marquès de Caldes de Montbui, 123, Girona, Monday to Friday from 8:30 to 20:00.

Would you like to talk it through with someone from the team?

Book on Doctoralia or message us on WhatsApp and we'll point you in the right direction. WhatsApp +34 621 404 235 · info@institutpsira.com · c/ Marquès de Caldes de Montbui, 123 · 17003 Girona

This guide is for general information and is no substitute for an assessment by a professional. In an emergency, call 112; if you are thinking about suicide, call 024.