

Published on *SeniorNavigator* (<https://seniornavigator.org>)

## 5 Tips for Difficult Family Caregiving Conversations

### **Before you jump in, do your homework first**

#### ESPAÑOL

Regardless of your specific caregiving situation, you're likely to engage in many challenging conversations with those you care for, as well as with other family members. You'll need to discuss topics like finances, legal issues, estate planning, living situations, care and treatment plans, safety and driving. These are sensitive subjects, and your perspectives or opinions may differ. As a longtime caregiver, I have had many of these discussions with my grandparents, parents, sisters and other family members over the years. Here are some of my tips to help make these conversations easier.

#### **1. Talk early and often.**

The more you've discussed and planned for the future, the easier it will be when it is time to make decisions. Talk early because it's easier to discuss matters when they are in the future or hypothetical, instead of imminent. Also, the last thing you want to do is struggle to have critical conversations in the middle of a crisis.

Talk often because we never know when our loved ones' wishes will change or the situation will shift due to alterations in health, finances or housing, for example. We need to be aware of our loved ones' current wishes and ensure that plans made years ago are still viable.

#### **2. Observe and do your homework before you act.**

If you are suggesting a change for your loved ones, spend time with them observing and gathering accurate, specific information about your concerns before you even begin a conversation. If you want to talk about driving, ride along first to make valid

observations. Worried about their safety at home? Stay with them for a few days to get a real sense of the situation. Is the mail piling up? Are they having trouble navigating stairs? Are they able to prepare healthy meals? Talk with the people who see them regularly and try to be objective.

Then research the options for support and care for them. If you want them to stop driving, be prepared to share alternative transportation options. If you believe they need support at home, be ready to explain who could help and how it could be paid for. If you believe they should move, investigate housing options, costs and locations, as well as activities, meals and transportation offered there. Never bring up a change unless you have realistic alternatives to offer.

### **3. Approach with love, concern and support.**

Remember, you are all on the same team with a common goal: the best possible care and quality of life for your loved ones. You all want them to be as independent as possible for as long as possible. Be clear that your thoughts and actions are motivated by your love and concern for them. Be sincere; they will see through a snow job right away. It's not about buttering them up for the fall. It's about honest, caring, clear communication. Starting out with a confrontational, negative attitude will sabotage the discussion. Don't make it a power play or set them up to feel threatened or defensive.

Our role as caregivers is always to support our loved ones — not to completely take over their lives — unless they are deemed entirely incapable of doing so due to cognitive impairments. If you are caregiving for your parents, I urge you not to adopt the viewpoint that you are now parenting them. You may be in a more supportive role now, but our parents will always be our parents, and they will respond much better to a respectful, compassionate attitude.

### **4. Communicate effectively.**

Use conversation starters. If you're uncertain about how to bring up the subject, try an indirect approach such as discussing an article or a book you read, a friend's situation or a television show. You'll find many great articles and videos on [AARP's caregiving website](#) and on [AARP's YouTube channel](#).

Use “I” statements. Saying “You need to ...” or “You just have to ...” puts people on the defensive. Instead, try saying: “I am concerned about ...” “I want to help you with ...” “I’m wondering about ...” “I’d like to support you in ...”

Ask for their input. It’s not a one-way conversation, so ask how they think they are doing and what adjustments they’ve thought about. Specific questions can be helpful, such as: “Do you have any worries or concerns?” “Is taking care of the house and yard becoming challenging for you?” “Would a bit of help with some things ease your stress?” “I’m wondering what your wishes are if something should happen to you — do you have [powers of attorney](#) set up?” “When it’s time for you to hang up the keys, have you thought about other changes you’ll want to make?”

Listen, reflect and validate. Focus on listening with an open mind, then rephrase and reflect back what they have said. Have compassion for their situation and understand that change is hard for everyone. The unknown can cause fear and discomfort for all of us at any age. It’s normal to want to avoid change, so tell them that you understand their feelings of reluctance, fear, anger or hopelessness, and that you want to help make change easier for them. Sometimes people just need acknowledgment that this is hard to deal with.

## **5. Include key people in the conversation.**

Sometimes the right people at the table can make all the difference. It may be important to include a certain family member whom they listen to, or a respected adviser such as a lawyer, doctor, faith or community leader or friend. You might even consider an objective third party like a [care manager](#), counselor, or a family or [eldercare mediator](#) to help facilitate the conversation.

Approach these conversations with patience and realistic expectations — it might take several of them before you come to a mutual agreement and make decisions. Be open to solutions you hadn’t thought of, and make it as easy as possible for those you care for.

For example, when we wanted Dad to stop driving, we met with his trusted doctor who brought up the subject; it was easier for Dad to absorb. Then, Dad insisted he and Mom would move to a senior community because they didn’t want to be isolated in their home. We had numerous conversations about the big move. I visited about a dozen locations (my sister joined me for several of them), then narrowed it

down to three, which we took my parents to visit. We were OK with any of the three choices, so they made the final decision. Many other conversations took place about the details of that move and their care in the following years. But the bottom line was that I did my best to ensure they felt loved, supported, empowered and more in control of their lives — regardless of the decision at hand.

----- Written by Amy Goyer, March 8, 2022. Amy Goyer is AARP's family and caregiving expert.

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Article Source

AARP

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<https://www.aarp.org>

Last Reviewed

Tuesday, January 2, 2024