Summer 2026
*Issue No. 177*

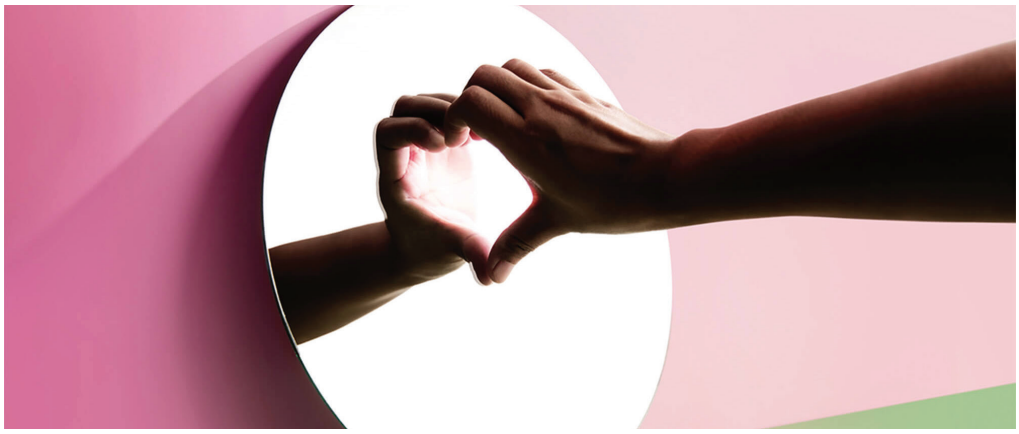
# MAINSTAY

**Well Spouse® Association**
*Support for Spousal Caregivers — You Are Not Alone*

***IN THIS ISSUE:***



***Mainstay asks for YOUR Input. YOUR personal stories might inspire others. Please take the time to share.***



## Why Taking Care of Yourself Is One of the Most Important Things Caregivers Can Do

By Paul Wynn via Brain & Life

Caregivers inevitably put themselves last, but even small acts of self-compassion can help sustain both their health and emotional well-being.

Before Susanne White became a caregiver, she believed she was well prepared for almost anything. She had led corporate teams, built a career in the music business, and performed under pressure. Caregiving shattered that confidence. The stakes felt unbearably high to care for her mom with Alzheimer's disease. Suddenly, White of Port St. Lucie, Florida, found herself questioning everything: Was she doing enough? Was she strong enough? Was she good enough? Instead of extending herself grace, she turned inward with criticism, powering through exhaustion, resentment, and anger she believed she was not allowed to feel.

What eventually followed was a slow, often painful reckoning—one that forced her to confront the challenges so many caregivers face and learn what self-compassion really means when caring for someone you love. "Self-compassion didn't come naturally to me as a caregiver," White says, reflecting on her experience, which she wrote about in her book, *Self-Care for Caregivers*. "It was something I had to learn intentionally."

**What is Self-Compassion?**
Self-compassion is the practice of extending the same care, patience, and understanding to yourself that you would naturally offer to someone you care about.

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In moments of struggle, how you treat others is often a far better guide than the voice of your inner critic. When a friend makes a mistake or feels overwhelmed, most people respond with empathy rather than judgment by listening, normalizing the difficulty, and offering encouragement, says Alison van Schie, co-host of the Self-Caregiving Strategies Podcast, a limited-series podcast with Theresa Wilbanks. "Self-compassion asks you to turn that same response inward, replacing self-blame with understanding and harsh self-talk with supportive language."

For caregivers, learning how to practice self-compassion can be especially challenging. Caregiving is often described as an act of love, but for many, those feelings quietly evolve into obligation, guilt, and relentless self-criticism. Caregivers frequently internalize a belief that tending to their own emotional needs is indulgent—or worse, selfish. Over time, this mentality creates a caregiver who is compassionate toward others and unforgiving toward themselves.

"Care partnerships have to be reciprocal," says Daniel C. Potts, MD, FAAN, a neurologist with the Tuscaloosa VA Medical Center and founder of the Cognitive Dynamics Foundation, who cared for both of his parents living with Alzheimer's disease. "There has to be receiving as well as giving. If one does not have self-compassion, one cannot carry on the journey over the long haul."

Dr. Potts admits that self-compassion was not on his radar when he helped his mother care for his father. Raised with the expectation that duty comes without complaint, he pushed forward until guilt eventually caught up with him. Only later did he understand that ignoring his own needs undermined his ability to show up sustainably for those he loved.

**Self-Care Tips for Caregivers**

Jennifer Bickel, MD, FAAN, vice president and chief wellness officer at The University of Texas MD Anderson Cancer Center in Houston, believes the problem begins with misunderstanding the concept itself.

"People sometimes think self-compassion is permission for lower standards," she explains. "That's not what this is about. Self-compassion is asking whether your internal dialogue is as kind as the words you would say to your best friend."

For caregivers managing competing demands like work, family, finances, and medical complexity—often while supporting children and aging parents simultaneously—there is rarely time to pause and reflect. Over time, harsh self-talk becomes normalized.

"We're so externally oriented," says Dr. Bickel. "We say, 'I have no time.' But self-compassion isn't about doing more or doing less. It's about harnessing the brain's capacity for resilience so we can do this work better."

Nichole Goble, director of community initiatives at the Caregiver Action Network, sees this dynamic play out daily. "Caregiving is rooted in love, duty, and responsibility," she says. "Over time, that can turn into a belief that your own needs must come last. Many caregivers internalize the idea that being 'good' means being tireless and emotionally steady at all times."

**What Can Caregivers Do if They Are Feeling Overwhelmed?**

Experts emphasize that self-compassion starts with awareness. "You can't change something you're not aware of," Dr. Bickel notes. "Most people don't even realize how harsh their internal dialogue is."

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Goble agrees. “Caregivers are highly attuned to the needs of others but far less able to notice their own exhaustion or grief,” she says. “Self-compassion begins when caregivers allow themselves to see their own experience clearly without judgment.”

Dr. Potts recommends mindfulness not as a trend, but as a practical discipline, whether it’s journaling, practicing creativity, prayer or meditation, all of these things can help foster more self-compassion. He adds, “speaking with friends in a very vulnerable way, learning from other caregivers, listening to other people’s stories—all of these things can be helpful to help us identify our inner voice.”

One of the most damaging beliefs caregivers have is that there is a “right” way to do everything—and that falling short is a moral failure. “Give up the idea of perfection,” Dr. Potts advises. “Shoot instead for transformation. Authenticity in the presence of life’s challenges is a much more worthy goal.”

Goble echoes this sentiment, encouraging caregivers to redefine success. “Replace the question ‘Did I do everything right?’ with ‘How did I show up for my loved one today?’ That reframing allows room for humanity.”

Dr. Bickel adds that caregivers should enlist others as mirrors. “Ask someone you trust to gently call you out when they hear you being harsh with yourself,” she suggests. “Sometimes we need external awareness before internal change is possible.”

**Simple Self-Compassion Practices**

Susanne White’s caregiving and self-compassion journey led her to become the founder of Caregiver Warrior—a community for caregivers to learn how to survive the caregiving journey with grace and empowerment. She is candid that simply understanding the concept of self-compassion does not mean caregivers will practice it when stress escalates. In the intensity of day-to-day caregiving, self-kindness is often the first thing to disappear.

White encourages caregivers to build in external reminders—daily check-in alarms, short morning intentions, or accountability partners—to prompt reflection and change of mindset. These small, intentional prompts act as guides, helping caregivers pause, reassess how they are feeling, and reconnect with more compassionate self-talk before exhaustion and self-criticism take over.

“Caregivers don’t forget self-compassion because they don’t care, they forget because everyone else’s needs come first,” says White. “That’s why kindness toward ourselves has to be practiced, prompted, and protected.”

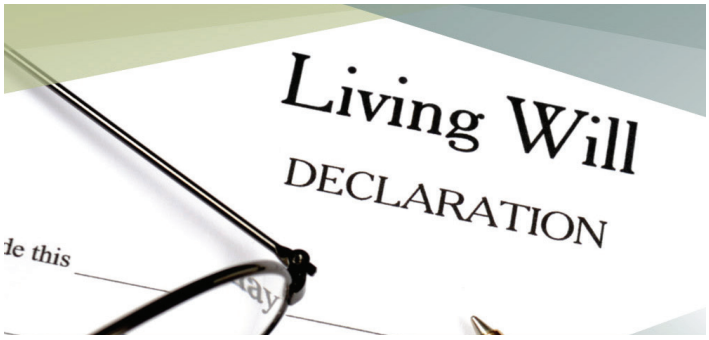
Dr. Potts has found creativity to be restorative and an effective way to reduce stress. Inspired by his father’s late-life discovery of watercolor painting, Dr. Potts turned to poetry during his caregiving years. “Creativity centers us in the moment,” he says. “It helps us practice gratitude, mindfulness, and empathy—without judgment.”

> ***Caregiving will never be easy. But suffering in silence, fueled by shame and impossible standards, is not a prerequisite.***

For Goble, connection with other caregivers is essential. “Isolation fuels self-criticism,” she says. “Hearing another caregiver’s story often reveals how unreasonable we’ve been with ourselves.”

Caregiving will never be easy. But suffering in silence, fueled by shame and impossible standards, is not a prerequisite. Self-compassion is not about doing less for others—it is about doing caregiving differently, with honesty, boundaries, and kindness directed inward.

As Dr. Potts puts it, “Your loved one may be bringing things out of you that help you grow. Learn to see that. Dwell on the small gifts. They will be there.”




# Legal Documents Every Caregiver Should Have

***Tools Protecting Your Loved One’s Wishes***

By Dr. Aaron Blight

Caregiving is an activity rooted in compassion, but it also comes with real legal and logistical responsibility. Whether you are caring for an aging parent, a spouse with a chronic illness, or a loved one with a disability, there may come a time when you are asked to speak or act on their behalf. In those moments, which are stressful and emotionally laden, having the right legal documents in place can make all the difference.
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> *Together, these documents form a legal safety net that protects autonomy, dignity, and clarity.*

These documents protect the care receiver's wishes, reduce family conflict, and allow caregivers to focus on care rather than crisis management.

One of the most important documents is a living will, sometimes called an advance directive. A living will outlines a person's preferences for medical treatment if they become unable to communicate. This often includes instructions about life-sustaining interventions such as ventilators, feeding tubes, dialysis, or artificial hydration. For caregivers, a living will removes the burden of guesswork and provides clarity during difficult medical decisions. It also gives healthcare providers guidance that reflects the patient's values rather than default medical protocols.

A last will and testament addresses what happens after death. It specifies how assets should be distributed, who will serve as executor, and, when applicable, who will be responsible for minor children or dependents. While it does not govern medical or caregiving decisions, an up-to-date will provides peace of mind. It reassures both caregiver and care receiver that affairs are in order and helps prevent legal disputes during an already emotional time.

Few documents are as essential, or as misunderstood, as power of attorney documents (POA). Power of attorney documents allow one person (the principal) to grant decision-making authority to another (the agent). Here are the different types of powers of attorney:

- A medical power of attorney authorizes the agent to make healthcare decisions when the principal cannot. This includes decisions about treatments, medications, care facilities, and end-of-life care, ideally guided by the principal's known wishes.
- A financial power of attorney allows the agent to manage financial matters such as paying bills, handling insurance claims, accessing bank accounts, and managing property. Without this document, caregivers may find themselves unable to handle basic financial tasks even when doing so is clearly necessary.
- A durable power of attorney is one that remains effective even after the principal becomes incapacitated. Durability must be explicitly stated. For caregiving situations, durability is critical, as incapacity is often the reason a POA is needed in the first place. Both medical and financial POAs can be durable.
- A general power of attorney typically grants broad authority over legal and financial matters but often becomes invalid if the principal becomes incapacitated unless it is drafted as durable. Because of this limitation, general POAs are usually less suitable for long-term caregiving unless carefully tailored.

A do-not-resuscitate (DNR) order is another vital document, particularly for individuals with serious or terminal conditions. A DNR instructs medical professionals not to perform CPR if breathing or heartbeat stops. This is a medical order signed by a physician and is separate from a living will. In many communities, emergency medical personnel are trained to look for a DNR posted on or near the refrigerator, as this is a commonly recognized location during emergency calls. Having the DNR clearly accessible can prevent unwanted interventions and ensure the person's end-of-life wishes are honored.

A HIPAA authorization is essential for communication. Privacy laws prevent healthcare providers from sharing medical information without consent. A HIPAA release allows designated caregivers to receive updates, speak with doctors, and coordinate care. Without it, even close family members may be left in the dark, especially before formal incapacity has been established.

To be truly comprehensive, caregivers should also consider a POLST or MOLST form(Physician or Medical Orders for Life-Sustaining Treatment), where available. These are medical orders that translate end-of-life wishes into actionable instructions for healthcare providers, particularly in emergency or long-term care settings. Unlike a living will, POLST/MOLST forms are intended for individuals with serious illness or advanced frailty and are immediately enforceable.

Another helpful document is a caregiver consent form (or caregiver authorization form), which may allow caregivers to assist with routine matters such as picking up prescriptions, communicating with schools or care facilities, or coordinating services. While not a substitute for a POA, a caregiver consent form can smooth day-to-day logistics.

Together, these documents form a legal safety net that protects autonomy, dignity, and clarity. While these conversations can feel uncomfortable, preparing in advance is one of the most loving acts a family can undertake. When paperwork is in order, caregivers are free to focus on what truly matters: providing care, comfort, and presence.

## Your Legacy

When people reflect on the values and causes they've supported throughout their lives, they often return to a simple question: What mattered most, and how can that impact continue?

For Bob, it was the Well Spouse Association, Bob valued WSA as a trusted source of knowledge and progress. He believed deeply in WSA's commitment to sponsor the most promising, forward-thinking work in spousal caregivers support. As he considered the future, Bob decided to include the Well Spouse Association in his plans. For him, it was a way to ensure that the clarity, confidence, and progress he valued during his caregiving journey would remain available to others long into the future.

That kind of planning is both practical and powerful. Creating or updating your will is one way to care for the people and causes you love most. As we go through this year, thank you for the ways you've already supported WSA and for considering how your legacy might continue support, research, knowledge, and hope for generations to come.

***With gratitude, WSA***

# Caregiving in My 70s

***Looking after my centenarian mother and disabled husband taught me these five lessons***

By Janie Emaus

Reaching 70 can come with unexpected challenges. For me, that meant spending a significant chunk of my early 70s as the caregiver for my mother, who was fit but often confused from the effects of dementia until she passed away in January. And until recently, I was also caring for my disabled husband, who was mentally aware but unable to walk by my side. Sadly, he passed away late last year.

I never imagined that in my eighth decade I would be an expert on hospital beds or the durability of pill crushers. But I learned a lot about coping mechanisms. I hope these tips can help others who are caregivers later in life.

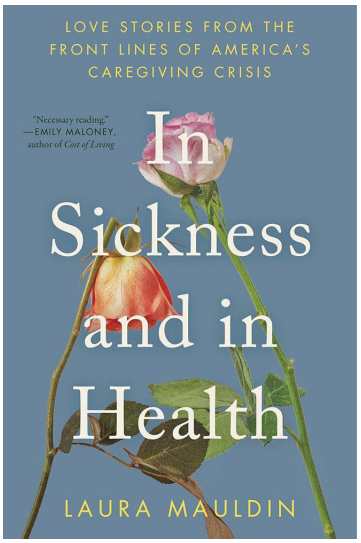
**1. ASK FOR HELP.** I realized I needed more help. What I didn't realize was that family and friends were waiting for me to reach out to them. Once I did, they showed up, easing my burden. And believe me, no one can do this alone.
**2. KEEP FRIENDS CLOSE.** Once a month, I try to spend an entire day or at least a night out with my friends. I can count on my girlfriends to bring laughter and comfort into my life.
**3. SNEAK IN ME TIME.** Stress wreaks havoc. On days when folding another pajama top is too complicated, I shake up a cold martini and sit under the Chinese elm in my backyard. Whatever it takes to bring you back to that happy place.
**4. GET DAILY EXERCISE.** If I don't take care of myself, I can't take care of anyone else. My favorite form of exercise is swimming, one hour leaves me feeling refreshed and ready to face my loved ones with a smile.
**5. BINGE-WATCHING.** There is nothing like a good story to take me away from reality. When I can, I'll binge a streaming series. I'm in a world far from my own.

Until she passed away, my mother enjoyed spending hours reading the paper. And until the end of his life, my husband and I could still hold hands and share laughter or tears each evening. I'm glad for the time I had with both.

*Janie Emaus, 77, is an author and a novelist. This essay is from AARP The Ethel newsletter. Visit aarp.org/ethel.com to subscribe for free. And you can visit aarp.org/caregiving for more caregiving tips and information.*

## WELL SPOUSE ASSOCIATION IS LOOKING FOR A SECRETARY

- Key officer role on the board
- Attend board & executive meetings (every 8 weeks)
- Turn AI notes into official meeting minutes
- Occasionally sign official documents as secretary
- Help shape the Well Spouse Association
- Encouraged to join and get involved




# Book Review

***In Sickness and In Health: Love Stories from the Front Lines of America's Caregiving Crisis By Laura Mauldin***

By Sheldon Friedman

WSA member Laura Mauldin has written an amazing and important book. Drawing on her firsthand experience as a caregiver for her former partner and her deep knowledge as a sociologist, she tells our collective story in a way that few if any other writers have the skills, sensitivity and qualifications to do. If you have been wishing there was a book you could give friends, family members, employers, co-workers and others who just don't "get it" about what you are going through as a spousal or partner caregiver-no matter how hard you have tried to explain it- then In Sickness and In Health is for you (and for them!).

The book starts out with the author's own gut-wrenching caregiver journey. A rare bright spot for Laura was when she stumbled upon a WSA support group meeting near her home. I won't spoil her compelling story by spilling any beans here, except to say that even if very little shocks you anymore, Laura's story will knock your socks off. After this introduction, the author jumps into chapter after chapter of stories based on extremely in-depth interviews which she conducted over several years, mostly or entirely with our members. These stories are, by turn, shocking, heartwarming, illuminating, insightful, unbearably sad, and for me at least, tremendously angering.

Of course, no two caregiver journeys are the same, but a key value of this book is the author's ability to connect the dots and draw out the most important common threads. One of these threads is Laura's concept of "The One" in a romantic or once-upon-a-time romantic relationship, in which the caregiving partner over time becomes all things to the partner who requires care. Increasingly, the caregiving partner is expected to meet every need, physical and emotional, 24/7-and slowly but surely, the caregiving partner often falls into this role. But, as Prof. Mauldin notes, becoming "The One" exacts a high price from caregivers in terms of their own physical and mental well-being and health. Not only that, but jobs are lost, promising careers are put on hold or abandoned, savings disappear, and household finances are strained to the breaking point. Marriages are sacrificed on the altar of Medicaid divorces.

This is where, for me, the anger comes in. As Laura ably explains, even though the United States is one of the wealthiest countries on earth, our social safety net and support systems for caregivers and their chronically ill and disabled charges are among the weakest in the developed world. The book describes the excruciating and dehumanizing gauntlet which must be run to access even minimal amounts of home care. All of this was already true long before the advent of the Trump administration, who's so-called "Big Beautiful Bill" and other regressive policies are cruelly shredding even more of what remains of our fragile and inadequate safety net. The giant holes in the safety net, Laura demonstrates, create a vicious circle in which caregivers feel trapped into supplying uncompensated care because there is no alternative, no other source of help.

*(Continued on pg 7)*

WELL SPOUSE® ASSOCIATION
Support for spousal caregivers

## *Well Spouse® Member Benefits*

- Quarterly Newsletter *Mainstay*
- Bi-weekly E-newsletter Member Minute
- Support Groups and State Contacts

***WSA website –***

- Seminar Presentations on Topics of Interest
- Support Group listings
- Important Info and Updates
- Important Links
- On-line membership/ renewal
- On-line donations
- Mentorship Program
- Annual National Conference
- Regional Respite Weekends
- Caregiver Journey Workshops

*Fellowship, long lasting friendships and the feeling you get in knowing our motto...*

***You are not alone.***

(Continued from pg 6)
The author sees "ableism" as a key reason for society's blind eye: the notion that people with physical, cognitive or mental deficits or disabilities are a burden on society and not deserving of care.

A corollary of "ableism" is that people who provide care also have very little social value. Laura traces the connection between ableism and eugenics, a pseudo-science first developed in the nineteenth century that was used to justify slavery, Jim Crow racial segregation and later, Nazi race theories. I am not saying Laura is wrong about the connection between ableism and the sorry state of the US safety net-in fact, no doubt she is on to something here-but I suspect and fear the problem may be even broader and deeper-seated than that.

One thing the book could have used is a more vivid sketch of positive social policy alternatives-universal health care, for example, including comprehensive non-means tested long-term care. Also, an accompanying discussion of what people could do through political action to make these and other urgently needed policies a reality would have been nice. Perhaps, though, it is too much to expect a single book to be "The One." Maybe Laura will address these topics in her next book.

Meanwhile, I highly recommend that every Well Spouse read and pass on to others *In Sickness and In Health*.

*The author is a retired economist and long-time Well Spouse. He chairs the WSA Social Action Committee.*

A heartfelt thank you to *Jennifer's Gift* for ensuring this story reaches those who need it most—offering comfort, connection, and guidance AT NO COST. Truly a gift in every sense of the word.

# Why We Created Jennifer's Gift

By Emily Markanich, Jennifer's Daughter

Jennifer's Gift was born out of love—love for a woman who gave everything to care for others, and love for the countless caregivers walking a path our family came to know intimately.

Jennifer Markanich was a lifelong nurturer. A neonatal nurse, business owner, stay-at-home mom, and interior designer—every chapter of her life was marked by care. She had a rare ability to make people feel held, seen, and supported.

When she was diagnosed with Stage IV colon cancer, the roles reversed. For the first time, she had to receive the kind of care she had always given. And for those of us who loved her, that meant learning how to show up—not just logistically, but emotionally and spiritually. It was a profound transformation.

Caring for Jennifer in her final years became one of the most sacred experiences of our lives. We learned, day by day, what it means to care for someone deeply without losing yourself in the process. Along the way, my father—her husband of 45 years—began writing The Other Patient, a book that gives voice to the caregiver experience.

The Other Patient is for those who find themselves in the role of caregiver—often unexpectedly—navigating fear, responsibility, love, and loss all at once. It offers language for what can feel impossible to articulate, along with a grounding perspective, emotional support, and a reminder that caregivers matter too.

That book is now the heart of this foundation.

Our mission is simple: to place The Other Patient into the hands of as many caregivers as possible—especially at the beginning of their journey, when support can make all the difference. Just as a small hospice booklet once brought our family clarity and peace, we believe this book can offer guidance, comfort, and a sense of not being alone.

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Today, we distribute books through partners like Oasis of Hope and are actively expanding our network of hospitals, organizations, and supporters to reach more caregivers in need.

There are several ways to be part of this work:

- Get involved or partner with us: *https://www.jennifersgiftfoundation.org/get-involved*
- Support our distribution efforts: *https://www.jennifersgiftfoundation.org/supporters-1*
- Access resources or request a book: *https://www.jennifersgiftfoundation.org/resources*
- Purchase a copy of The Other Patient: *https://www.theotherpatient.net/order-now/*

Jennifer gave us many gifts throughout her life. But perhaps the most profound was the opportunity to care for her in return—and to learn what caregiving truly is: not just a role, but a relationship. A rhythm. A sacred exchange.

***Jennifer's Gift exists to pass that gift forward.***

***Now it's your turn...***
Whether yours is a spiritual or religious awakening, a pratical idea, a humor-filled moment, or a serious reflection, we want to hear from you. We welcome your submissions!

*Personal Story - Poetry - Caregiver Tips - Artwork*
*Travel Story - Spiritual Journey - Humor - Book Reviews*

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# Well Spouse Association Connects with Local Care Professionals

On February 11th, Well Spouse Association Board Member Barry Appelbaum met with members of the Professional Care Alliance of the Delaware Valley (PCADV) at Sunrise Retirement Community in Media, PA.

PCADV, a 20-year-old organization based in the Philadelphia area, brings together professionals across the senior care industry who are dedicated to supporting the well-being of older adults. The meeting welcomed approximately 50 attendees representing fields such as nursing, real estate, and legal services.

During the event, Barry delivered a PowerPoint presentation highlighting the mission and impact of the Well Spouse Association. His presentation was warmly received, sparking interest and engagement among attendees.

*If you are aware of organizations that could benefit from learning more about the Well Spouse Association—whether through an in-person presentation or via Zoom—please reach out to Barry or the main office.*

**WSA Membership AND Annual Appeal**

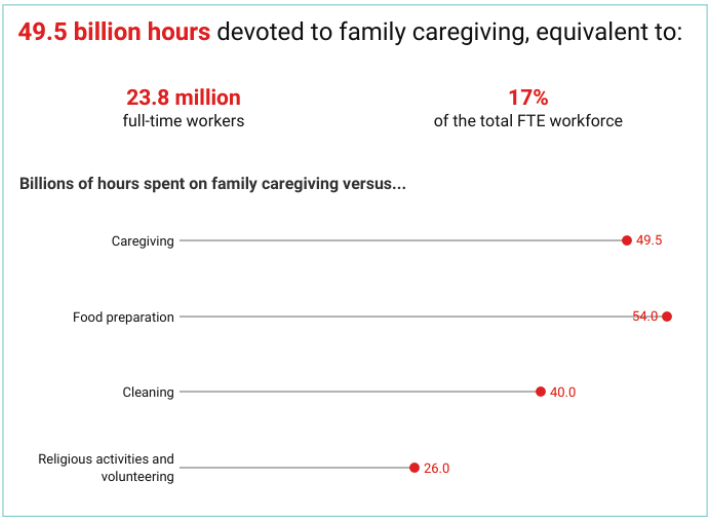
*WSA's mission to provide emotional support to spousal caregivers is funded primarily by membership dues and our Annual Appeal.*

*We welcome supporting memberships from professionals and organizations who would like to regularly receive our newsletter, Mainstay, brochures, and other information to pass along to their clients.*

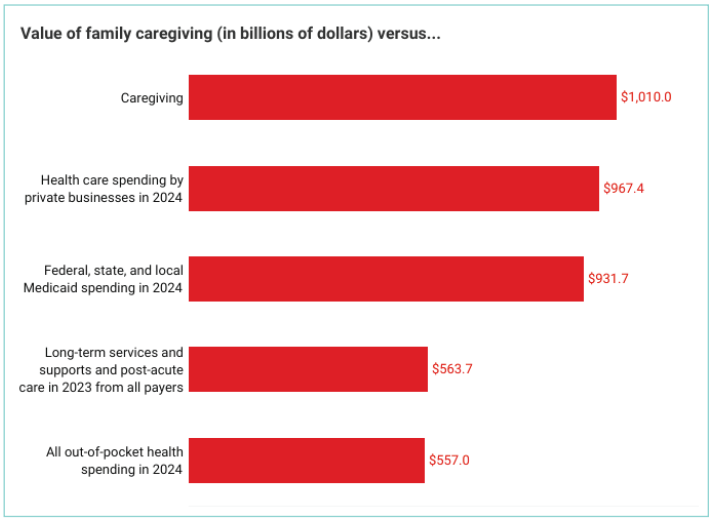
# Valuing the Invaluable 2026

By Ari Houser, Selena Caldera, Brendan Flinn, & Rita Choula, AARP Public Policy Institute

Family caregivers provide the majority of long-term services and supports in the United States, assisting adults with disabilities and complex health needs with daily tasks of living, complex medical and nursing tasks, and coordination of medical and social services—nearly all without pay. Drawing on Caregiving in the US 2025, this report estimates that the 59 million caregivers of adults provided 49.5 billion hours of care in 2024 at an average value of $20.41 per hour. This sums to a total economic value of $1.01 trillion for all adult caregiving in 2024.

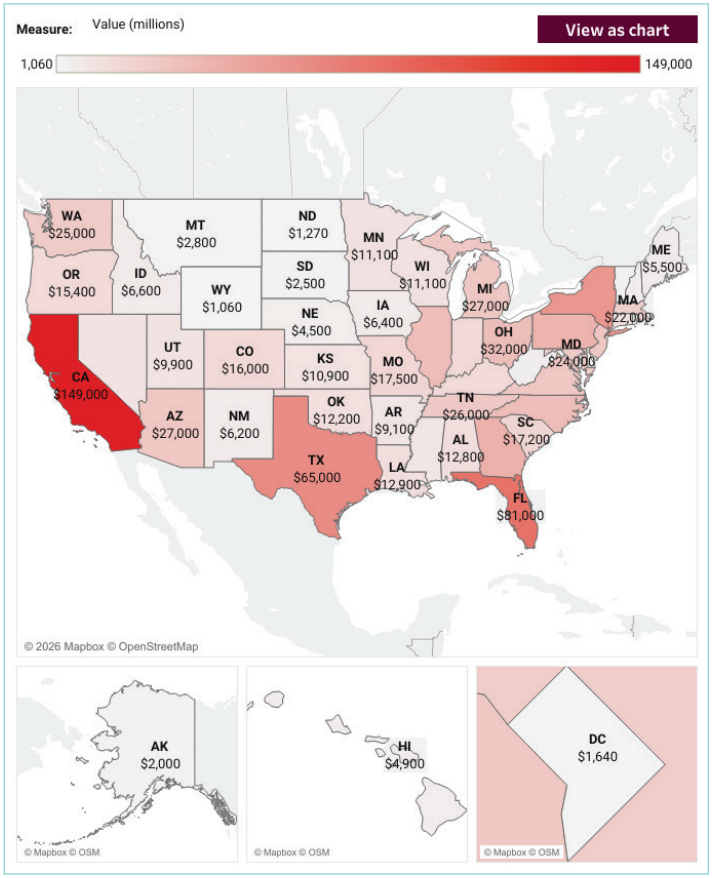



Using new methods that reflect the full range and intensity of caregiving tasks, the analysis highlights the growing demands placed on caregivers and the substantial value of their work. The report also presents state-level estimates demonstrating variation in the local economic value of caregiving, driven by differences in wages and the cost of care in each state. Read the full report.




**Key takeaways:**

- An estimated 59 million family caregivers helped an adult family member, neighbor, or friend with daily activities during the year; about 37 million of these caregivers (63 percent) provided care each month.
- All together, these family caregivers provided a total of 49.5 billion hours of care during the year, adding up to a total economic value of $1.01 trillion (an average of $20.41 per hour).
- The economic value of family caregiving exceeded the total amount of federal, state, and local Medicaid spending in 2024 ($932 billion).



# A New Vital Sign for Caregivers:

***Understanding Your Caregiver Intensity Score***

By Dr. Aaron Blight

Caregiving doesn't come with a monitor—but maybe it should.

I recently had the privilege of meeting and listening to Alexandra (Alex) Drane, Founder and CEO of ARCHANGELS, a public benefit corporation dedicated to reframing how caregivers are seen, honored, and supported using a combination of data and stories, through public and private partnerships. I appreciate how ARCHANGELS has been approaching their work supporting caregivers and wanted to share a few thoughts about it.

If you've been following my blog, you know that I have encouraged caregivers to use a simple graph to chart the relationship between their loved one's health condition and caregiving intensity over time. This activity reveals inflection points that illustrate how the needs of the care receiver drive the actions and demands placed upon the caregiver and thereby require changes in the caregiver's thinking. Today I learned that ARCHANGELS has developed a practical, useful, and data-driven approach to measuring caregiver intensity using their proprietary caregiver intensity index.

The idea of the caregiver intensity index is simple: if you're a caregiver, take a few minutes to answer a series of online questions about your loved one, your care-related experiences, and your feelings about how things are going. After you've answered all the questions, you will receive a "caregiver intensity score" that quantifies the degree of strain you may be under in your care-related role.

In addition to your numeric score, ARCHANGELS has categorized final scores into three levels of concern:

- **Clear** (which I like to think of as "green");
- **Yellow** (implying a state of warning); or
- **Red** (which Alex referred to as "fire," a state of more serious concern).

The combination of color and number may be likened to a vital sign, giving the caregiver a good idea of how urgently they need help.

Alex astutely observed that caregivers who need help may not know where to find it. As a result, ARCHANGELS is working with private and public organizations to facilitate access to existing resources that are available to caregivers, especially those who score in the red zone of caregiver intensity. It is important to note that we are talking about existingresources—offered by employers, health plans, and/or governmental agencies—that may be unfamiliar to the family caregiver. When you drill down and discover these resources, you realize that caregivers really do not have to go it alone.

I particularly like how the caregiver intensity index factors the context of caregiving into the equation. Besides collecting data about the care receiver's health condition, the tool solicits information about emotional well-being and other stressors in the caregiver's life. The result is a revealing summative score that could prompt the reluctant family caregiver who objectively needs help to actually take the necessary steps to seek assistance.

Self-identification as a caregiver is often the first hurdle to overcome before accessing caregiver supports. The ARCHANGELS caregiver intensity index offers a method of self-reflection and discovery that could help caregivers cross that hurdle. By coupling the process of caregiver self-identification with direct links to caregiver supports, ARCHANGELS is offering a data-driven technological platform creating bridges between caregivers, employers, health plans, and governmental agencies, all of whom have an interest in improving the way we care for one another in our rapidly aging society.

The ARCHANGELS platform is indeed timely. It may come as no surprise to hear that the percentage of caregivers who find themselves in the "red zone" of caregiver intensity has been growing in our post-COVID world. Alex said that before COVID, 8% of caregivers were in the red. Today 32% of caregivers are in the red. It's a sign of the growing demands placed on caregivers responsible for loved ones with increasingly complex health conditions in our uncertain and ever-changing world.

# *Are You Caring for a Loved One with Heart Failure?*

**We're Looking for Family Caregivers Like You!**

We are conducting a research study to learn more about how caregivers manage their own health while supporting loved ones with heart failure. Join the study to share your experience!

**YOU MAY QUALIFY IF YOU:**

- Are 18 years or older
- Are the primary caregiver for a family member with heart failure
- Have been diagnosed with OR take medication for:
  - *High blood pressure*
  - *Diabetes, or*
  - *High cholesterol*

**WHAT'S INVOLVED?**

- Complete a 45-60 minute online survey.
- Participate in a 45-minute Zoom interview, if invited.
- Receive a token of appreciation.

**Scan the QR Code to See If You're Eligible and Get Started!**

**For more information, please reach out to our study team at:**

HFCaregiverStudy@bc.edu

BOSTON COLLEGE
Connell School of Nursing

## *IMPORTANT REMINDER FOR MAINSTAY*

If you are currently receiving a hard copy of Mainstay, you will continue to have it mailed to you. If you wish to change to having it electronically mailed to you, please notify the office, as this will save WSA printing and mailing expenses.

If your email, address, or current caregiving status changes, please let the WSA Office know.
**(732) 577-8899** or ***info@wellspouse.org***

*The E-Link to Mainstay is sent via Constant Contact*

## WSA MEMBERS:

We are asking members who update their profiles on the WSA website to also notify the WSA office at ***info@wellspouse.org***, so that the office records can be updated as well.

***Thank you!***

**NOTE:**
***Please consult a physician or an attorney before taking action on any medical or legal information contained in any Mainstay article. The views expressed by our writers are their own and do not necessarily reflect the views of WSA.***

## *Check out WSA on Social Media*

***@WellSpouseAssoc***

***https://www.reddit.com/r/WellSpouses/***

***GROUP: https://www.facebook.com/groups/spousalcaregivers/***

***WSA'S PAGE: https://www.facebook.com/WellSpouseAssociation***

***https://www.youtube.com/channel/UClmr1x4bQgt-Szf7NVRcZew/about***

***PLEASE "LIKE" US, "JOIN" US, OR "FOLLOW"***

## MILITARY CAREGIVERS

We have reintroduced our Zoom Support Group for Caregivers to Veterans. Meetings are the 3rd Saturday each month. We are seeking someone to technically assist in opening/closing the meeting. WSA will provide everything needed. Carol, the Support Group Leader will host the meeting but cannot perform this function.

**IF YOU ARE INTERESTED IN BEING AN ASSISTANT, or in joining the group, please contact Carol at *christofero65@gmail.com***

We look forward to connecting military caregivers!