You Have Needs, Too

You may be thinking: “How can I focus on my needs, when I hardly have enough time to breathe?” And although it may seem impossible to find the time, you can’t expect to put all of your energy into caring for your loved one without taking some time to care for yourself. Caregiving can lead you to neglect your own physical health, social life, and emotional well-being. This may occur for any number of reasons, including lack of time, fatigue, inability to leave your loved one alone, and feelings of guilt about enjoying yourself while they are suffering.

Whatever the case, ignoring your own needs can lead you to develop health problems, become physically and mentally exhausted, and neglect relationships with your friends and family. With all of this added stress in your life, it makes it almost impossible for you to provide the best care for your loved one.

This was written to let you know that it’s okay (and necessary!) for you to care for yourself in the midst of caring for an ill loved one. Just remember that every little thing you do counts and can help you feel better emotionally and physically.

It is important for you to keep in mind that even if you are the primary caregiver, it is not realistic for you to try to handle everything yourself. Most likely, you have a life outside of the patient, filled with additional duties and responsibilities.

Though at times it may seem like your life revolves only around your loved one’s needs, you have a right to address your own needs, too.

Paying Attention to Your Feelings

Caring for your loved one can bring with it a number of feelings and emotional reactions. You should not feel guilty or ashamed about any of your feelings. Being a caregiver and seeing someone you love suffer from a physical illness is difficult. You have the right to feel any emotion that you have. You may even experience different emotions over the course of the patient’s illness or in different caregiving situations.

Making Time for Yourself

Everyone gets stressed out and needs a break sometimes—most of all, caregivers! It is difficult to confront all of the feelings that you are having when you are constantly with the patient. It is vital for you to take some time away so that you do not become overwhelmed by the stress that caregiving can bring. Even short breaks can restore and renew your emotional energy. However, taking breaks requires planning so that you can feel secure and comfortable during your time away from the patient. You can begin by arranging for alternate care for the patient for a short amount of time. Do something that you enjoy and let yourself and the patient become comfortable with the idea of your absence.

(Continued on page 5)
FREE Tele-Workshops for Family Caregivers

**Juggling Everyone's Expectations: The Great Balancing Act**

Do you feel like you are trying to meet everyone’s expectations, including family members, healthcare professionals, your employer and maybe even your own potentially unrealistic ones? In this tele-workshop you will explore the true realities of how to care give well. Though everyone’s reality is unique there are common themes that frequently arise. Learn how to stop your juggling routine and to navigate through the myriad of expectations placed upon you.

**Thursday, March 3, 2011**  
**6:30 - 8:00 PM**

**What Is It That You Really Want to Say and Do?**

We all have an “inner critic” or an “inner guide” that let's us know what to say or what not to say; what to do or what not to do. Does this sound familiar to you? Join us at this tele-workshop and learn ways to use this “insider” information to benefit you as a family caregiver.

**Wednesday, April 6, 2011**  
**6:30 - 8:00 PM**

**Empathy: An Essential Skill for Family Caregivers**

Empathy plays an important role in caregiving, especially during stressful times. During those times family caregivers can often feel frustrated, irritated and resentful. The person they are caring for may seem to be “not cooperating” or “be too demanding”. Empathy is the ability to understand and appreciate another person’s circumstances, thoughts, and feelings. In caregiving, empathy can include the caregiver having empathy for the care recipient’s situation or the care recipient and other family members understanding what the caregiver is experiencing. Developing empathy can help reduce your exhaustion and enrich your caregiving experience. In this tele-workshop you will explore how to access one of your most valuable assets.

**Wednesday, May 11, 2011**  
**6:30 – 8:00 PM**

**Tele-workshops are facilitated by: Allison Reeves, M.A., Registered Clinical Counsellor**

To register for FREE TELE-WORKSHOPS call Care-Ring Voice Network at 1-866-396-2433 or on-line at [www.careringvoice.com](http://www.careringvoice.com).

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**Tele-Workshop Podcasts**

If you were unable to attend a tele-workshop or if you participated, but would like to review what was presented - a podcast for each tele-workshop topic is available on our website at: [http://www.fcns-caregiving.org/education/tele-workshop-podcasts/](http://www.fcns-caregiving.org/education/tele-workshop-podcasts/).

New podcasts will be added approximately one week after each tele-workshop.
Respite - Taking a Pause

Family caregivers regularly hear from well meaning family, friends, neighbors and healthcare professionals that they should get “respite” for themselves to maintain their health. Too often, family caregivers think, “how do I take time for respite for myself, when there is way too much to do already.”

In preparation for writing this article, we looked up the word respite in dictionaries and then in a thesaurus and this is what we found – a reprieve; a pause from doing something; interruption in the intensity of doing something and take time out to relax.

The phrase, “a pause from doing something” seems easier to digest than the word “respite”. A pause can mean taking a deep breath, stretching your body out, taking a minute to look out the window, answering the telephone, listening to music, sipping on your morning coffee/tea; calling another family member to spend time with the care recipient while you go to lunch with close friends.

Taking a pause can be the beginning of taking time for yourself – a pause can be spontaneous, unplanned or planned, structured time or both. People actually accomplish more when they take time for short rests. Taking a breather allows you to take a moment for yourself and to re-energize yourself as a caregiver.

Research indicates the importance for caregivers to have respite options available in order to maintain the ability to be an effective caregiver. Seeking support and maintaining one’s own health are keys to managing the caregiving years (www.HelpGuide.org). Maintaining health for both the caregiver and the care recipient is important to prevent caregiver burnout, social isolation and depression.

In recognizing your need for respite or a pause it is important for you to identify:
- What is important for you as a family?
- Is support what you need the most?
- Where within the 24-hour time clock do you have free time?
- Are you open to others coming into your home to provide support?
- What services can you afford?
- Are there resources in the community that might meet your respite needs?

Considering these questions may help better determine what respite options to pursue.

Family caregivers and care recipients need to have an open dialogue about respite needs with each other and with other family members in order to make decisions about the type of respite wanted; either planned or unplanned; in the home or in the community.

Suggested “talking tips” include:
- Engage family members in any decisions that are made by talking openly and regularly about your loved one’s needs and condition. Family members who don’t share the day-to-day caregiving experience may not truly understand the situation.
- When asking for support, ask for specific areas of need and times of the day when you need help.
- If family is not available, in-home services can be provided by volunteers or paid help, occasionally or on a regular basis. This option allows the care recipient to stay within the home, and can be a valuable time for caregivers to meet their own needs.
- Respite care options offered through the health authority are available by contacting Home and Community Care,
Be the Noodle: Fifty Ways to be a compassionate, courageous, crazy-good caregiver

By: Lois Kelly

Publisher: World Audience
Date: 2010

Based on the author’s three month odyssey helping her mother live at home while dying, Be The Noodle chronicles the crazy things that happen during this unpredictable journey, things that no medical, hospice, or traditional how-to-deal-with-dying books explain.

From the gut wrenching, like not being able to call 911 during a crisis once you sign up with hospice and struggling to be kind and helpful when you feel like a sleepless shrew, to the mundane, like dealing with too many banana breads from well wishers and advocating for patient martinis with the oncologist.

Part love story, part how-to manual, part memoir, Be The Noodle shows readers how to find superpowers they never knew they had, stay sane, take comfort in sick humor, find compassion and become crazy-good caregivers, one of the most courageous jobs most of us never wanted or have ever been trained to do.

Basic Tax Tips for Family Caregivers

The Alzheimer Society has created a special “Tax Edition” of their In Touch newsletter which is available online at www.alzheimerbc.org/News-and-Events/Newsletters.aspx. Please note that the information provided is a summary only. It is meant to alert caregivers about what they may want to consider discussing with their tax preparer. Many of the tips are applicable to all family caregivers and not just those caring for someone with Alzheimer’s disease.
As you both become more comfortable, you can begin to increase the length of your outside activities.

**Expressing Your Feelings**

It is common to spend so much of your energy supporting the patient that you end up ignoring, holding back, or failing to recognize your own feelings about the situation. Continuously ignoring your own feelings can be very dangerous because it does not usually make them go away. Instead, they can keep building up inside of you until you become so emotionally stressed that you can no longer handle the situation. For this reason, it is extremely important for you to identify and address the feelings that you are having. Here are some specific, appropriate ways to express and cope with your emotions.

**The Power of Social Support**

As the primary caregiver of your loved one, most of your attention is probably spent on him/her. You may find that you rearrange other commitments and areas of your life to be with the patient. Often, friends and relatives are neglected because you are too busy, don’t want to burden others with your problems, or don’t think they will understand. You may also feel as though friends have limited their calls or visits, which may be the result of their own discomfort with the patient’s illness, not knowing what to say to you, or feeling like they will be in your way. Much of this can be changed through proper communication and allowing yourself some time to spend with friends. You need the support and love of your friends and family to feel less alone and to cope better with the challenges of caregiving.

**Maintaining a Life of Your Own**

It is not healthy to spend all of your time with the patient, which can lead to resentment of him/her if you don’t feel like you are able to live your own life. Just as it was normal for you to do things without your loved one before he/she got ill, it is also okay now. You are an individual with your own interests, thoughts, and desires. At least some of these need to be expressed and fulfilled so that caregiving does not consume your life. Though work can sometimes be an additional burden, it is a good way for you to maintain a sense of purpose outside of caregiving. If you are retired or unable to hold a job because of your caregiving responsibilities, there are plenty of other things you can try.

**It’s Okay to Do Something You Enjoy**

If the thought of going out and enjoying yourself makes you feel guilty, you are not alone. Many caregivers feel that enjoying themselves implies that they are abandoning the patient. Taking a break and having fun do not make you a bad person, and certainly don’t mean that you don’t care about the patient. On the contrary, outside activities will help you maintain your sense of self and independence, clear your head, reduce stress, and improve your relationship with the patient.


Many detailed ideas for meeting your needs are included in this free on-line resource.
Educational Workshops for Family Caregivers

Family Dynamics and Caregiving

When a family member becomes ill or disabled, dynamics in the whole family can change significantly. Each family member brings their own unique history within the family and their own feeling and reactions to the new situation. These differences can lead to conflict among family members especially when making decisiona or choices about caregiving.

This workshop will help you understand how family dynamics (both past and present) can impact caregiving and you will learn practical tips for dealing with problematic interactions between family members. Specific issues such as changing family roles and "grudges" within the family will be addressed. You will also explore how to create healthier communication within the family with the goal of providing the best possible care and support for your ill or disabled family member.

Facilitator: Allison Reeves, M.A., Registered Clinical Counsellor
Saturday, Mar. 26, 2011 9:30 AM – 12:30 PM
$25.00 for FCNS members  $30.00 for non-members
Limited seating. Please register by Mar. 21st.

Letting Go While Holding On: The Transition to Facility Care

When the time comes for a family member to move into a care facility, the decision leading to this is another step along the continuum of care. It is a time of transition for both the care recipient and their family. Relief is often felt by the family caregiver, but it is in conflict with other emotions such as guilt and grief. There can be a sense of loss as your role as primary caregiver shifts. This shift requires a gentle "letting go" while still holding on with love and compassion.

In this workshop we will explore how your role as family caregiver changes when the person you are caring for moves into a care facility. Practical information will also be provided on visiting with your loved one, communicating with healthcare providers and normalizing some of the emotional responses to a transition to care.

Facilitator: Sheilagh McIvor, Social Worker
Saturday, April 2, 2011 9:30 AM – 12:00 PM
$20.00 for FCNS members  $25.00 for non-members
Limited seating. Please register by March 28th.

Location of Workshops:
Canadian Cancer Society, Vancouver Island Lodge, 2202 Richmond Road, Victoria, BC
(Free parking available behind the lodge.)

To register for workshops:
Please call FCNS at 250-384-0408 or register on-line at
www.fcns-caregiving.org/education/live-workshops-and-events
As A Family Caregiver, What Choices Do I Really Have?

Knowing that you can make choices gives you a sense of freedom and a sense of control. It places you firmly in the driver's seat of your own life. As a caregiver we may feel obligated or forced into our current situation. We often may feel that we have no choice but to provide care and to make certain sacrifices in our own life. When we think we don't have choices, we can feel frustrated, resentful, or trapped.

In this workshop you will explore the idea that yes, you are choosing to be a family caregiver, and that yes, you have the right to change your mind at any time and that yes, you have the right to give care in a way that is different from how others think it should be done.

**Facilitator:** Allison Reeves, M.A., Registered Clinical Counsellor

**Saturday, April 30, 2011**

9:30 AM – 12:30 PM

$25.00 for FCNS members

$30.00 for non-members

Limited seating. Please register by Apr. 26th.

The Reluctant Caregiver

This workshop will be different from anything you may have attended before. You will have the opportunity to vent, receive compassion, be challenged respectfully by a skilled therapist and learn ways to manage your unique caregiving situation more easily. If you are either “reluctant” or “resentful” this workshop is for you.

**Facilitator:** Allison Reeves, M.A., Registered Clinical Counsellor

**Saturday, May 7, 2011**

9:30 AM – 12:30 PM

$25.00 for FCNS members

$30.00 for non-members

Limited seating. Please register by May 2nd.

**Location of Workshops:**

Canadian Cancer Society, Vancouver Island Lodge, 2202 Richmond Road, Victoria, BC

(Free parking available behind the lodge.)

**To register for workshops:**

Please call FCNS at 250-384-0408 or register on-line at


(Respite, Continued from page 3)

via the General Enquiries Line and asking for a Case Manager to come to your home to assess for respite care options.

Being clear on wants, needs and desires for respite with family, neighbors and friends is an essential component in the caregiving journey. Although it may seem like a lot of work to plan and execute the activity, caregiver research has shown that taking a pause in the day has positive outcomes for the health and well-being of both the family caregiver and the care recipient.
Committeeships: Why they should always be an option of last resort

Last month I received two telephone calls from family members. Both were debating the advantage of taking courses in order to help them communicate more effectively with their aging parents versus “just going to court and getting appointed as Committee for their aging parent.” In one of the cases, their father has dementia. If they had called even a few months ago, I might have been able to save them a lot of time and thousands of dollars involved in a court application to have them appointed as Committee. Unfortunately, with the father now not having legal capacity it is too late, and Committeeship is now their only option.

In the other case, there is still plenty of time, but the family seems to think that they cannot get their mother to let them help her. So if they cannot get their mother to let them help, they will “just go to court and get appointed as her Committee”. What the family members did not understand is that a Committeeship is not a magic wand and should never be considered as the place to start or the easy way out.

What is a Committee or Committeeship?

A Committeeship is an order pronounced by the Supreme Court of British Columbia pursuant to the terms of the Patients Property Act of British Columbia, R.S.B.C. 1996, C349 (the “Act”).

In this proceeding, a person, who is called a Committee, is appointed to manage either or both the financial and the personal needs of another who is unable to do so. In doing so, the Court in appointing a Committee of the person (or the “patient”), strips the incapacitated person of all of her or his rights to make personal decisions for himself or herself. It is a rather draconian remedy.

Section 15 of the Act also stipulates that the Committee of a person has custody of the patient. In other words, the patient, in such a case cannot make any decisions for themselves. These powers are subject to any limitations imposed by the Court and must be exercised to the benefit of the patient and for his or her family.

A Committee of the affairs of a person has, according to the Act, all the rights, privileges, and powers that a patient would have if the patient was capable. The Committee in managing the affairs of the incapable person may make investments for the patient, but must comply with the requirements of the Trustee Act of British Columbia in doing so. A Committee may make gifts and charitable donations on behalf of the patient but if the gift was not for the benefit of the patient or the patient’s family, the Committee risks personal responsibility for repaying the gift to the patient’s estate. A Committee may also make complex estate planning decisions, such as the administration of companies owned by the patient.

Because a Committee can have his or her decisions reviewed by the Court, and because he or she is a fiduciary, his or her decisions must always be seen to result or be in the best interests of the patient without thought of personal gain. The Committee’s interests must not be in conflict with the patient’s interests.

What are the advantages of a Committeeship?

A Committeeship allows someone to take control and manage the affairs of an incapacitated person when no other method of delegating those duties is in place. For example, if someone’s dementia has progressed to the extent where they can no longer sign legal documents, look after themselves, no longer have the capacity to appoint someone to act under a Power of Attorney, or if a sudden illness or accident prevents them from controlling their lives again with no Power of Attorney in place, a Committeeship is the only way of managing that person’s assets and life including making medical decisions in that person’s best interests.

What are the disadvantages of a Committeeship?

A Committeeship application to the Court can be very expensive. A straightforward Committeeship application must include fees for doctor’s affidavits to support the contention that the person is no longer capable of managing themselves or their affairs. In (Continued on page 9)
addition, the person petitioning for a Committeeship will have to hire a lawyer to prepare and file the petition and supporting affidavits and represent them in Court. In making the application for a Committeeship, the Public Guardian and Trustee of British Columbia’s permission is always required and further in getting the Public Guardian’s approval of the proposed application, the Public Guardian charges $535.00 just to review the Court documents.

In addition, if there is a family dispute over the appointment, the lawyer’s fees will increase as the litigation escalates. I was recently involved in a contested Committeeship application which lasted three and a half years with over 20 full days in Court.

Another additional cost is for the services for the individual appointed. While a family member will probably waive this fee, an independent would not, especially in the case of the appointment of the Public Guardian and Trustee where the Court sees no other independent party to be able to administer that person’s financial affairs.

A Committeeship can also be very demeaning for your family member as they will usually have to be served with the Court documents and become aware that their family and possibly their doctor testifies to their incapacity. This is in addition to the emotional anguish of the family member having to make the declaration. It is a very intrusive procedure for the entire family. What was up until now a private affair now becomes a matter of public record.

What does a Committee do?

A Committee is responsible for the financial security and administration of the incompetent patient’s financial decisions. In some cases, the Court may also order that the Committee is also committee of the patient’s person in which case the Court will have the ability to make health care decisions for the patient. Thus the Committee can make decisions about personal matters such as medical care, residency, food, clothing, asset protection, paying bills and making investments. Certain transactions such as selling real property, borrowing or gifting assets and hiring attorneys may require Court permission.

In addition, the Committee has to account to the Public Guardian and Trustee office every two years as to how he or she has administered the patient’s financial affairs.

Each time a Court approval is sought, more legal fees must be paid. There will also be a significant delay in completing these transactions as compared as to what can be accomplished by an agent under a Power of Attorney.

If there is a family member who wants to be a Committee, is that family member automatically appointed?

This is usually the case, but not always. The Patients Property Act has not set out a clear priority list as to who is preferred, although family members are usually the first choice. If all family members are in agreement, then a particular family member will probably be the best choice. However, as often happens, there is a lot of conflict among family members, and when this happens, the Court could appoint a third party such as the Public Guardian and Trustee or even a lawyer who is impartial.

The problem with having a third party as a Committee is that the third party does not know the family so the family’s decisions might not be the decisions the family wants made. In addition, a Court appointed Committee will charge for their work adding an additional expense.

In having the Court approve the appointment of a Committee, the proposed Committee will have to prove that the patient, over whom the Committee is seeking Committeeship, is incompetent to handle his or her affairs. This is usually accomplished by including in the application the affidavits of two physicians usually experienced in the field of geriatric care, to render an opinion that the patient is incapable of managing themselves and/or their affairs. However it should be noted that just because the patient is not cooperating with the proposed Committee, or not doing what the family thinks they should do, this will not be enough to justify an appointment of Committee.

Just because that person has been named as Committee does not mean the family member will suddenly begin to cooperate with him or her. In fact just the opposite is often the case. If they were not happy with someone being involved in their affairs before, it is highly unlikely that a Court proceeding is going to make them warm up to the idea. This is one reason why Committeeships should be a last resort.

For all of the foregoing reasons, it is very important to start communicating with your elderly parents early enough and persuade them to see an Elder Law attorney to have their legal
and financial affairs placed in order as soon as possible. This may involve the preparation of a Power of Attorney and or a Representation Agreement appointing a trusted person, often a family member, to make respectively, financial and health care decisions. However, if your parents are among those refusing to get their legal or financial houses in order, and you are concerned and do not know how to proceed, you would be well advised to not to wait for a crisis to develop. Early and ongoing communication and planning is the key. If your siblings are in agreement, having regular family meetings to discuss these matters will often result in parents seeing the light and making adequate provisions and plans for their later years.

Editor’s Note:
The purpose of this column is NOT to advise people on their legal affairs or concerns, but to provide basic information for discussion with their own legal counsel.

Do You Need Help Making Healthy Living Changes?

Maintaining your own health is essential in order to be an effective caregiver. Peer coaches through the Patient Voices Network are trained to support and motivate you toward healthy lifestyle changes, such as:

- Getting more exercise
- Eating healthier
- Achieving/maintaining a healthy weight
- Becoming smoke free (i.e. reducing/quit smoking).

A Peer Coach will work with you to identify and set your own realistic and achievable health goals, and then support and help motivate you to reach your goal.

This is what one individual had to say about her sessions with a peer coach, “A cheerleader! Someone to check in to see if I followed through with my promises to myself. Also, my coach would ask me questions on alternatives to what I can do if different conditions arise. My coach basically helped me eliminate any excuse I could think of!”

So get connected today with a Peer Coach through this FREE BC-wide, phone-based service!

Call or visit the PVN website now:
Toll Free: 1-888-742-1772
Email: connect@patientvoices.ca
www.patientvoices.ca

Patient Voices Network is led by ImpactBC in collaboration with Patients as Partners, Ministry of Health Services

Research Participants Needed

Research Study #1: A study being conducted through UVIC wants to better understand your experience of providing care at home to a loved one who is ill, and how you and your home care nurse work together to provide that care. If you are interested in finding out more about the study, please contact Faye Wolse at 250-472-5501 or email: fayewols@uvic.ca.

Research Study #2: A research project focused on examining the needs and experiences of dementia caregivers is taking place at UVIC. Family members of individuals with typical (e.g. Alzheimer’s Disease) or atypical (e.g. Frontotemporal Dementia) forms of dementia may qualify to participate in this study. If you are interested in finding out more about the study, please contact Megan Caines at 250-858-5836 or email cainesm@uvic.ca.
Mark Your Calendars!
3rd Annual FCNS Charity Golf Tournament
September 23, 2011

Join the fun by gathering a foursome, donating an item to the silent auction or becoming a sponsor.

For more information or to register, visit www.familycaregiversnetwork.org or call 250-384-0408

"Network News"
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We gratefully accept articles, stories, information sharing items, questions and reviews of appropriate materials to the readership. Submissions should be no longer than 650 words, and may be subject to editing. At FCNS we are committed to protecting your privacy according to the Personal Information Protection Act.

526 Michigan St., Victoria, B.C. V8V 1S2  Tel: (250) 384-0408, Fax: (250) 361-2660
Email: caregiversupport@fcns.ca  www.familycaregiversnetwork.org

All FCNS memberships expire effective Mar. 31/11 unless you already renewed or paid for your membership after Dec. 1/10. Thank you.

Yes, I would like to be a member of the Family Caregivers’ Network Society.

Name: ____________________________________________________________
(Please print)  First name   Last name

Address: _________________________________________________________

City: ___________________________  Prov: ___________________  Postal Code: __________

Phone number: ___________________  Email: ___________________________

Membership fee enclosed:

Individual $20  [ ]  Non-profit $30  [ ]  Corporate $100  [ ]

New membership:  [ ]  Renewal:  [ ]  Donation included:  [ ]

Donations are gratefully accepted. You will receive a charitable tax receipt for donations of $20 or more. Please do not send cash in the mail. Make cheques payable to the Family Caregivers’ Network. Return to: FCNS, 526 Michigan Street, Victoria, B.C. V8V 1S2
Family Caregiver Support Groups

Victoria Evening Support Group
1st Monday of each month, 7:00 - 9:00 PM
FCNS office, 526 Michigan Street

MOVED TO NEW DAY:
Sidney Support Group
3rd Tuesday of each month, 10:00 AM - Noon
Lounge, Shoal Centre, 10030 Resthaven Dr.

Salt Spring Island Support Group
Every Wednesday, 11:00 AM - Noon
Seniors for Seniors Centre, Ganges
(The SSI group is offered in partnership with the Alzheimer Resource Centre, however this group is open to all caregivers.)

Pender Island Support Group
Every Monday, 10:00 AM - Noon
Pender Island Medical Centre, 5715 Canal Rd.
(This group is offered in partnership with the Pender Island Healthcare Society.)

Attendance at all our support groups is on a drop-in basis and they are facilitated by trained volunteers. For further information call the FCNS office at 250-384-0408.

Online Support for Caregivers
Cancer Chat Canada

VON Canada Caregiver Connect
http://www.caregiver-connect.ca

Caring for Aging Parents in Canada
http://agingparents.ning.com

Community Support for Caregivers

A.L.S. Society: 250-721-0633 (caregivers can attend same support group as care receivers)

Alzheimer Resource Centre: 250-382-2052

BC Cancer Agency: 250-519-5525
(caregivers can attend same support groups as care receivers)

BC Schizophrenia Society, Strengthening Families Together Program: 250-384-4225

Fibromyalgia and Chronic Fatigue Syndrome: 877-437-4673

Huntington Society: 250-704-2512

Multiple Sclerosis Society of Canada: 250-388-6496

NEED Crisis and Information Line 250-386-6323

Parkinson's Caregiver Group: 250-475-6677

Peninsula Stroke Recovery: 250-652-3016

Victoria Brain Injury Society Family Program: 250-598-9339

Victoria Stroke Recovery Assoc.: 250-383-2623

Thanks!

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