

## Care Conversations: Not An Easy Topic

Written by Evan Plys

At some point, we all have to have difficult conversations. If you have ever broken up with a partner, you know how hard it is to broach this topic, even if it will make you happy in the long run. Often times the anxiety about having the conversation is more painful than the conversation itself. Many times, after some initial discomfort, people actually feel pretty good after having these difficult talks. So why is it so hard to have them?

Relational Frame Theory proposes one possible answer to this question. As humans, we are programmed to avoid things that cause anxiety, doubt, and sadness and move toward things that produce happiness, excitement, and relief. This makes sense, as you would be hard-pressed to find someone who would choose to be berated and yelled at, over having a pleasant, reciprocal conversation. However, always avoiding the negative and moving toward the positive has some serious consequences. For example, if you've ever trained for a race you know that, particularly early on in the training process, there are some pretty negative thoughts, feelings, and sensations tied to having to push your body to an extreme. However, if you avoid these, you will likely not reach your end goal of finishing in the race, and if you do, you may be setting yourself up for longer lasting pain. Relational Frame Theory sums this sentiment up by suggesting that avoidance of negative thoughts, emotions, and sensations is effective in the short-term, but can cause serious problems in the long-term. Therefore, to meet long-term goals and to live a full life, you sometimes have to experience and accept the negatives for what they are.

So, let's go back to conversations. One of the hardest conversations aging families face is related to providing care for a loved one. As we know, older adulthood can sometimes be met with physical, cognitive, and social losses that make it difficult to continue a previous lifestyle. As a spouse, child, or friend, noticing changes in a loved one that concern you is often a difficult topic to bring this up with that person. Again, this makes sense because, as previously mentioned, we tend to avoid things that cause anxiety, doubt, and sadness; and recognizing that a loved one now has trouble taking care of him or herself independently encompasses all three of these negative traits, not to mention the additional negative emotions of grief, guilt, and hopelessness. Often times when families avoid these difficult conversations around care, it can have negative implications like caregiver burnout, lack of planning, or not knowing preferences around healthcare and end of life. Some particularly difficult conversations that families often face are around the setting of care (e.g., home care, assisted living, memory care, or nursing home) and the role of family as care needs increase. Despite the negative thoughts and feelings associated with these topics, all of these difficult conversations are important to have with your loved one. Overall, it is vital to know your loved one's wishes and to honor them, and if you avoid the difficult conversations, you may never know.

Oftentimes, individuals struggle with planning and having conversations around care, as well as processing all of the emotional consequences of this phase of life. For additional resources or help, please contact the UCCS Aging Center at (719) 255-8002.

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