Programming a Synagogue Support Group for Caregivers

Submitted as a requirement for the F.T.A.

by

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Support groups have been shown to be an effective coping mechanism for a wide variety of problems. Some, such as those for substance abusers, help individuals deal with health related problems. Others, give individuals aid in coping with parenting concerns, such as adolescent behavior problems. Recently, it has been shown that adults who are responsible for aging family members are in need of peer support as well. "Group interventions are being used as a means to help caregivers cope with the stresses of caregiving" (Toseland, R.W. et al, p. 465). Although therapy groups may be held within the confines of the therapist’s office or under the direction of health care professionals, the caring community of the synagogue can also provide an opportunity for congregants with like concerns to give one another support. In fact, it has been shown that, "...peers may be as effective as professionals in leading support groups for caregivers" (Toseland, R.W. et al, p. 465). Historically, the Jewish Community has provided for the needs of its members. The synagogue in particular has shown concern for the needy through Tzedakah boxes, has taken care of its dead through the Chevraah Kiddusha Society and has formed groups to meet the social and spiritual needs of its congregants. Therefore, a self-help group for relatives and friends of the aged would be an appropriate expression of the role of the synagogue. This is particularly true in light of the research which has shown that an, "...informal support system provides more assistance than do formal organizations" (Cantor, M. p. 597).

The need for a support group for caregivers, friends and family of aging parents and other loved ones may surface in a
variety of ways. As Executive Director at Congregation Gates of Prayer, my awareness of this need was gradual. The first hint that such a group would be beneficial to the congregation came from a number of conversations with individual members in my office. Often, members would appear in the office on temple business and end up talking about a parent who required constant attention, who was becoming more and more infirm and in need of help, or whose demands were increasing stress for the congregant. One had moved an ailing father a thousand miles to live with her and now believed her whole life revolved around him. The situation was putting a strain on her marriage and the problems involved in finding a day sitter were making it harder and harder for her to be at work. Another's mother was bedridden, living in her home and causing increasing friction between family members. A third was worried because his mother kept changing residences and, in fact, had left a nursing home in a taxi and gone back to an apartment in which she used to live. Story after story over a period of just a few weeks began to pour out, each indicative of the kind of negative effects caregiving can have on the, "mental, physical and social functioning of caregivers" (Toseland, R.W., et al, p. 465). An idea began to gel. Perhaps there were others with similar problems within the congregation who could benefit from discussion of those concerns.

At the same time as these events were unfolding, I volunteered as a member of the local task force on Jewish aging. This group was comprised of representatives from Jewish Family Service, Jewish Welfare Federation and the various synagogues.
Its purpose was to develop a manual similar to those found in other cities giving information on resources available for the aged. The focus was to be Jewish with a particular emphasis on suggestions for caregivers. Most of the calls at Jewish Family Service regarding the aged were from adult children responsible for the care of elderly parents. These individuals were looking for Jewish resources and tradition to aid them in their task. They agreed with the position that, "...families are responsible care-giving agents who provide substantial physical, emotional, social and economic support of their chronically ill elderly relatives" (Brody, S. et al, p. 557) and were asking for help in creating the appropriate support system. Discussions with other task force members indicated that there was a growing concern for support for caregivers, especially those members of the so-called "sandwich" generation who might be parenting teenagers as well as trying to cope with aging parents. The research has shown that this particular group has special needs with, "...the potential for considerable stress from situational as well as personal factors" (Cantor, M., p. 599). For these individuals, usually female, "The care of aging parents is but one of a number of competing responsibilities..." (Treas, J., p. 486). Once the need for support for caregivers had been expressed it was necessary to determine how widespread it was and how to initiate support. The first step toward developing a support group within the congregation was determining if there actually was a need or if my conversations with members and task force participants were isolated incidents. Discussions with the lay leadership and the rabbi led to the idea of a survey to determine whether the need
for such a group existed. Further discussion revolved around the budget required to develop a self-help group. It was decided that budget would be minimal and include only the cost of the survey, publicity and occasional audio/visual materials for the group. The additional cost of an appropriate leader was saved since my own geriatric counseling experience and previous experience working with adult children of the frail elderly, qualified me to lead the group. Development of the survey and initial publicity were the next steps in the group’s formation.

A questionnaire was prepared and sent out with the Congregation’s monthly Bulletin (Appendix A). It was printed on colored paper to be easily identified by congregants as they read their Bulletin. To further publicize the support group the issue of the Bulletin that contained the questionnaire also had an article describing the intent to initiate a support group for those concerned about aging relatives. All questionnaires indicated that they would be treated confidentially and should be returned to my attention.

Publicity has since been expanded. Articles about the group have been placed in the local Jewish newspaper to create awareness in those who are unaffiliated. The temple Bulletin continues to mention the group as does the announcement sheet read at services the week preceding a meeting. The support group has been included as part of Continuing Education’s Mitzvah Corps (Appendix B). Members who had participated in the first session spoke to friends which brought additional families to subsequent meetings. Word of mouth has continued to be an effective source of publicity.
During the month following the questionnaire's inclusion in the Bulletin ten responses were received. Although this was a small (2%) percentage of the membership it was determined that it was sufficient response to warrant the establishment of the group. In fact, ten to twenty member families turns out to be the optimal size for such a group. In a research study on the effectiveness of peer-led support goups the size of each group and each control group was limited to eighteen to twenty participants. (Toseland, R. W.). Further organization of our synagogue group was accomplished through individual telephone calls to each respondent to the questionnaire. The purpose of the calls was to determine an appropriate meeting date and time as well as to gather any additional information about individual situations which might not have been included on the form. After a meeting date was selected each prospective participant was sent a post card with the date and time of the meeting one week before the first meeting.

Ten families were represented at the first meeting. Some had not responded to the questionnaire; others who had expressed interest were unable to attend due to emergencies that had occurred. In two cases the emergency involved the aging relative. There was great diversity in the group of people that attended. Families were represented both as couples and as individuals. Included was a cross section of the Congregation. Members who were active in other capacities (e.g., board members) mixed with those whose commitment to the Congregation was far less. Some attendees were dealing with local relatives on a daily basis through visits and/or telephone calls. Others had
problems with "long distance" relatives living in other cities or states. Some families were taking responsibility for a parent or parents and elderly aunts and uncles as well. Members were represented who were "only" children and thus handling their problems alone. Others had problems with siblings who were doing too much or too little of the caregiving. Some had frail or seriously ill relatives. Others had relatively healthy parents who were aging fast but still quite active. All age groups were represented. They ranged from a forty-eight year old with a sixty-five year old mother to a congregant whose father was approaching ninety.

There were several important objectives for this first meeting. Establishment of ground rules and a discussion on expectations was planned. In addition, it was important for the group to begin to bond with one another, a task which might have been difficult due to their diversity. The initial meeting was structured to do both.

First, people introduced themselves and told a little about the relative(s) or friend with whom they were concerned. This was a way of showing commonality of problems, a first step in the bonding process, so necessary for the success of the group. This self-help approach of sharing is the most common coping method for caregivers. (Toseland, R.W.) The expectation on the part of the leader was to spend most of the first meeting speaking about issues concerning group process. The reality was that only those issues that were most important, such as confidentiality, were actually discussed. The group was quite self-directed right
from the beginning. They brought and shared their personal concerns with one another for a much longer period of time, and in a much more open fashion, than was originally anticipated. Confidentiality was discussed with the group agreeing to share openly but to keep the discussion within the room. There was an immediate bonding, based on commonality of problems and the desire to assist one another with possible solutions. One area of surprise was the length of time required for the group meeting. The original expectation was for an hour to an hour and one-half. The group met for two and one-half hours the first session. Subsequent sessions have lasted for two hours.

Expectations of caregivers generally did not closely coincide with those of their family members to whom care was being rendered. The research in this area indicates this is not unusual. Elderly relatives often do not see the stresses experienced by their caregivers. "...caregivers forced to adjust their lives to encompass the increased demands of a dependent older person were most likely to give up those things which had some elasticity and were more marginal to personal or family equilibrium and survival. Thus, the most severe impact was registered in areas such as free time for oneself and opportunities to socialize with friends, take vacations, have leisure time pursuits, and run one's own house." (Cantor, p. 600) This inevitably led to stress for the caregiver involved. Our group showed similiar signs. There were feelings of guilt expressed over the resentment felt when activities that brought pleasure and relaxation had to be given up in order to spend time with aging relatives. Emotional strain was given as one of the
major reasons for involvement with the support group. The understanding of one another’s stress led to decisions regarding the future of the support group after its initial meeting.

The original participants had to decide whether or not the group should remain open to other participants and for how long. The decision was to publicize the group again and to accept newcomers openly. This has been the continued approach with people added to the group as desired. Follow up was important to keeping participants involved. A list of all participants was mailed to each member and to those who had initially expressed interest but who had not attended. This was done to add additional support as members were encouraged to contact one another outside of the group setting.

It is clear that congregants involved in the care of aging relatives are under stress and benefit from sharing their concerns with others who have the same or similar responsibilities. The synagogue provides an ideal setting for the development of a group to offer support to one another and to ease the stress associated with caregiving. Through determining need, publicizing the formation and existence of a self-help group and by careful and caring leadership, members of the "sandwich generation" and other caregivers can find mutual support in the loving atmosphere of their temple community.
References


Bibliography


CONGREGATION GATES OF PRAYER

CONFIDENTIAL QUESTIONNAIRE

FAMILIES OF AGING PARENTS

Please complete this questionnaire and return it to Liz Hirsch at the Temple Office. All information will be held in strictest confidence. As soon as the results of the questionnaire are received you will be contacted.

NAME: ____________________________________________

ADDRESS: ____________________________________________

PHONE (H): ____________________________________________ (W): ____________________________________________

Do you have aging family members? _______ Male _____ Female

Age(s) of aging family members. ____________________________________________

Place(s) of residence:

- Living independently ______
- Living with a family member ______
- Out of town ______
- Retirement home ______
- Convalescent home ______
- Nursing home ______
- Other ______

Physical and/or mental infirmities that affect relationships:

Are you interested in a support group in which we would discuss and share feelings regarding aging family or friends?

Would you prefer a group that met mornings? ______

afternoons? ______

evenings? ______

Do you have specific topics you would like to have discussed?
To rejoice with bride and groom

Basic Judaism  Rabbi Loewy, Instructor
☐ This ongoing course on the basics of Judaism will include eighteen sessions from September to May. Review holidays and life cycle events, along with fundamental Jewish values and beliefs. This program is especially helpful for those learning about Judaism for the first time, but all can benefit. Next meeting: Wednesday, October 17 at 8:00 p.m.

Volunteer Choir  Victoria Cohen May, Director
☐ The psalmist calls upon us to “Sing Unto God.” The Gates of Prayer Volunteer Choir, under the direction of soloist, Victoria Cohen May, does just that. The choir sings for monthly worship and special occasions. Next meeting: October 9 at 7:30.

Coffee, Tea and Torah  Janis Ekman/Sisterhood
☐ The teachings and history of the Books of Leviticus and Numbers will be covered in the ongoing study of Torah this year. Requirements for participation are the ability to read, an inquiring mind and a questioning spirit. With Rabbi Loewy’s guidance the Torah text takes on new meaning. New participants are always welcome. Next meeting: Thursday, October 18 at 12:30.

Chavurah  Rabbi Robert Loewy
☐ A Chavurah is a small group of people who meet on a monthly basis at homes or sometimes at the synagogue to deepen Jewish commitment and experience, as well as establishing a core group of people with whom to share the joys and sorrows of life. Two such groups are already formed. If you would like to create or be part of a new Chavurah group the possibility is always open.
Please return form to: Gates of Prayer, 4000 W. Esplanade Ave. 70002

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<tr>
<th>Name:</th>
<th>Address:</th>
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I would like the opportunity to be involved in the following mitzvot:

- ______ Caring Committee
- ______ RAIN
- ______ Shabbat Express
- ______ Tsedek Society
- ______ Ushers
- ______ Environmental Awareness
- ______ Outreach
- ______ Minonaires
- ______ Lovers of Israel
- ______ Basic Judaism
- ______ Soviet Jewry/Operation
- ______ Coffee, Tea and Torah
- ______ Exodus
- ______ Chavurah
- ______ Ikhaim
- ______ Support Group for Families
- ______ Volunteer Choir
- ______ of Aging, Loved Ones

The word “mitzvah” means more than a good deed. It suggests the religious obligations that we take upon ourselves as responsible Jewish men and women. A synagogue has the responsibility to provide its members with the opportunity to perform mitzvot. We invite your commitment:

Hillel taught: “If I am not for myself, who will be?” The following mitzvah opportunities will serve our Congregation and the Greater Jewish Community:

- **Caring Committee** Yvonne Hiller, Chairman
  - Rachmanut—compassion is the guiding principle of this committee. Gates of Prayer members are often in need. A friendly phone call to a shut-in, a home cooked meal after a hospitalization or during times of mourning, assistance for a bi-weekly grocery run, are but a few of the possibilities to express caring. Next meeting: Tuesday, October 9 at 7:30.

- **Shabbat Express** Brotherhood
  - Some of our members are unable to drive to synagogue on Shabbat. Drivers are badly needed to transport members from all parts of the community on a periodic basis to and from services.

- **Ushers** Tom Magnus/Brotherhood
  - A smiling face, a warm word of greeting—helpful guidance to find a seat in the sanctuary, all help to enhance the worship experience. Volunteers are needed throughout the year to assist at our many different worship services.

- **Outreach Committee** Peter Ivory, Chairman
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**Outreach Committee**  Peter Ivory, Chairman

- The Outreach Committee is devoted to addressing the needs and concerns of intermarried couples and their families, as well as Jews by choice. Through presentations, discussions and workshops, this committee helps to create a welcoming atmosphere for this precious segment of our congregational family. Next meeting: Tuesday, October 9 at 7:30.

**Lovers of Israel**  Naomi & Larry Orlansky, Co-chairs

- It is a mitzvah to have a special caring for the land of Israel and its people. This new group has three major goals: to provide programs about Israel to the Congregation; to encourage travel to Israel by teenagers and adults; to promote membership in ARZA, the Association of Reform Zionists of America by every member. First meeting: Tuesday, October 9 at 7:30.

**Soviet Jewry/Operation Exodus**  Sue Tillis, Chairwoman

- The unprecedented release of thousands of Soviet Jews provides a mitzvah opportunity for all Jews. First, we must be supportive and caring to those few Soviet Jewish families who have come to our community. Second, we must mobilize financial support for the thousands settling in the United States and Israel. First meeting: Tuesday, October 9 at 7:30.

**L'Chaim**  Florence Loexy, Chairwoman

- "L'chaim, To Life" is a traditional Jewish aspiration. The "L'chaim Group" is intended to provide an opportunity for our older members to come to the synagogue for at least a monthly gathering on a weekday morning or afternoon to socialize, learn and celebrate life. Special Shabbat morning programs are anticipated as well. First Planning meeting: Tuesday, October 9 at 7:30.

**Support Group for Families of Aging Loved Ones**  Liz Hirsch

- The Support Group for those with aging parents or other loved ones gives congregants an opportunity to share problems and concerns and to seek possible solutions in a caring atmosphere. The group meets once a month and is open to all who wish to participate. Next meeting: Monday, October 29 at 7:30 p.m.