

## Appendix B

### Evolution of Major Types of Caregiving Dyads

#### B.1 Caregiver – Spouse Dyad

Max was a caregiver husband whose retired social worker wife Sharon had been “kind of taking care of me— nutrition, and this and that -- for years....” As they got along in years, both received diagnoses for different cancers. Her case progressed faster than his, and

“...we made the joint decision, primarily hers, to enter Hospice for her. They thought it would be 6 weeks, 3 months at the longest...we got 6 months and 4 days...and, that 6 months we spent together were some of the most precious of our marriage; because we could... we said things to each other that would’ve never come up if we hadn’t both recognized that things were terminal...”

Max continued describing how the dyadic relationship between him and Sharon continued to evolve from she “taking care of him,” to him “taking care of her...the little personal things...brushing her hair,” and finally to him taking care of himself

“...then there’s a whole ‘nother aspect ...since we’re going to lose her, who’s going to care for me?...I don’t know anything...so she’s trying to tell me: “you know - oatmeal - fellas can do it...here’s how...and so forth...see, I’ve got to learn simultaneously while we’re losing her...hey, I’ve got a future...well, can I be up to it at 90?...I’m 91 now....”

The above example illustrates the dynamic evolving of the Max-Sharon (caregiver care-recipient) dyad over the course of Sharon’s illness and even in her legacy of “the precious moments...a gift due to her...that carries me through living now” and from which he derives meaning (R3).

#### B.2 Caregiver – Parent Dyad

Linda had been caring for her mother, a retired psychiatric social worker specializing in gerontology, over the last 50 years. About 13 years ago, her mother had a heart attack followed by a series of strokes, and now suffers from vascular dementia and mental illness. According to Linda,

“she’s never been an easy person to deal with.... she sabotages the intakes to ensure I don’t get any kind of help...and... five years ago, I moved in with her to care for her, and that has impoverished me and put a real burden (on me)...at this point, she’s doing great, and she’s put me in the ground...”

The example demonstrates how Linda (caregiver) and her mother (care-recipient) have evolved as a dyad over the course of progression of her mother’s illness. Linda was trying to “maintain a career and a life of my own...” while caring for her mother, but finds herself “impoverished”

while her "...mother's doing great." The dyadic relationship between the caregiver and parent has evolved to the point where caregiver's caring has been beneficial to the recipient, but detrimental to her own situation (R11).

### **B.3 Caregiver-Friend Dyad**

Sasha, an only child, had not been a caregiver to either of her parents. And when the opportunity came up to help an older gentleman in her building, she began with "just assisting and being a friend." Over a two-year period, she became

"...more-or-less a companion when he was diagnosed with acute leukemia, so I would go with him to his appointments, did everything that I needed to do to assist him and be part of his care, and as time went on it (leukemia) became progressively involved where I had to just totally assist him because he had no family in town, so everything just sort of fell on me..."

And Sasha was not prepared for this downward trend in his health. She constructed meaning from the situation through applying religious values/beliefs ...

"...hopefully when my time comes there will be someone who will look after me...and so, that's why I did it (caregiving)....."

In this caregiving relationship, the Sasha - friend dyad evolved from "friend" who was "assisting" to becoming the volunteer who was the "caretaker." And, through this transformation that she did not expect nor was prepared for, Sasha constructed meaning from the barriers she encountered during caregiving (R10).