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Katelyn Byrnes
Temple University Graduate Student
Katelyn.kelly.byrnes@temple.edu

The Impact of Caregiving on Health Behaviors among Family Caregivers

Search Terms: Caregiver, health behaviors, leisure and recreation

Years: 2001-2014

Databases: AgeLine, Academic Search Premier, CINAHL, ERIC, PsycARTICLES

Number of Articles: 8

Summary of Research Findings:

As health issues occur, older individuals may require increased assistance from their family members. Studies have shown that individuals who are caring for their parents focus less time on their own leisure pursuits and health-promotion behaviors (Castro, King, Housemann, Bacak, McMullen, & Brownson, 2007). In addition, family members who are providing care to elders often report greater health-risk behaviors, such as poor diet, lack of exercise, as well as increased smoking and alcohol use (Shifren & Chong, 2012).

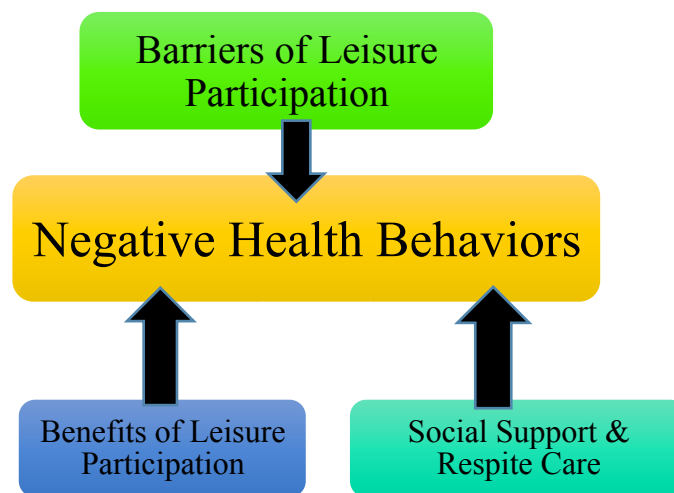
Raboinowitz, Saenz, Thompson, & Gallagher- Thompson (2011) reported that caregivers often eat fewer than 2 meals a day due to caregiving stress. They also found that caregivers had high levels of depressive symptoms due to increased vulnerability. Depression may hinder caregivers from participating in positive leisure and increase their negative health behaviors. When comparing health behaviors among caregivers and non-caregivers, it was found that caregivers consume fewer fruits and vegetables than their counter partners (Castro, King, Housemann, Bacak, McMullen, & Brownson, 2007; Shifren & Chong, 2012). Caregivers also experienced decreased quality and quantity of leisure due to lack of time, motivation, energy, financial resources, and support from others (Dunn & Strain, 2001; Gahagan, Loppie, Rehman, Maclellan, & Side, 2007; & Galdwell & Bedini, 2004). Another leisure barrier reported in the literature was related to gender-based role expectations (Galdwell & Bedini, 2004). In general, females feel a lack of entitlement to leisure because of traditional gender role expectations to care for others. Consequently, female caregivers often deprioritize leisure in their life for the sake of meeting the needs of others. Additionally, Son, Shea, Femia, Zarit, & Stephens (2007) found that feelings of overload resulted in caregivers spending less time on taking care of their own health. While there is overwhelming evidence indicating that caregivers reduced their leisure participation due to their caregiving role, Castro et al., (2007) reported that caregivers increased their engagement in walking as a stress coping mechanism compared to non-caregivers. Further research is required to examine the impacts of caregiving on health behaviors among family caregivers.

Knowledge Translation Plan:

Leisure participation allows caregivers to alleviate stress, cope with caregiving responsibilities and strain, and to form social relationships with others. Certified Therapeutic Recreation Specialists (CTRS's) can play an active role in providing recommendations and suggestions for improving health behaviors and quality of life in caregivers. Knowing that there are numerous barriers preventing caregivers from leisure participation, CTRS's can work with caregivers to develop strategies to manage

these leisure barriers including: lack of time, energy, motivation, financial resources, and support from family and friends. For example, CTRS's can suggest time management strategies in assisting caregivers to allow small fragment of 10-15 minutes of incorporating leisure into their caregiving responsibilities. Other areas that CTRS's can work with caregivers are enforcing leisure education and health promotion programs in order to promote a healthy diet and positive ways to cope with their stress.

In order to assist caregivers cope with their stress, CTRS's can encourage them to attend support groups. At support groups, it allows caregivers to know they are not alone, socially network with other caregivers, and address their emotional needs (Gahagan et al., 2007). Additionally, caregivers should be encouraged to use respite care that allows themselves to get a break from providing all activities of daily living. CTRS's can also recommend caregivers to take some time to pursue their interests. Gahagan et al., (2007) found that many caregivers use prayers or other religious activities as a way to reflect on their caregiver experience and cope with the caregiving stress. Other leisure activities that were suggested in the literature, including travel, walking, reading, socializing, gardening, driving, listening to music, shopping, and water activities (Gahagan et al., 2007).



References

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