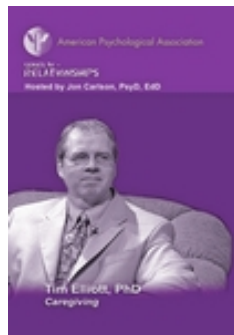


## Helping the Overlooked Health Care Provider: Therapy With Caregivers

A review of the video



Buy from  APA

### Caregiving

(2006)

with Tim Elliott

Washington, DC: American Psychological Association, 2006. American

Psychological Association Relationships Psychotherapy Video Series, Item No.

4310751. \$99.95

---

Reviewed by

[Lisa Fitzgibbons](#)

As a result of advances in medical care, more people are living longer with chronic health conditions and disabilities. The responsibility of helping those persons living with a chronic health problem often falls to family members. The role of the caregiver is not typically limited to caring for sick or disabled family members; caregivers often have multiple life responsibilities that include other family members and work obligations. The impact of caregiving on the caregiver has been difficult to assess. Researchers have struggled with

capturing the multidimensional effects of caregiving. More specifically, researchers have noted that early research focused on the burden of caring for a sick or disabled person, whereas later research has recognized that some caregivers experience positive feelings associated with their helping roles (Machamer, Temkin, & Dikmen, 2002). Psychologists who recognize the multifaceted nature of caregiving may be in a better position to support the caregiver while addressing the caregiver's individual concerns.

In *Caregiving*, part of the APA Relationships Psychotherapy Video Series, Tim Elliott demonstrates his work with a mother who takes care of her adolescent son with cerebral palsy. The adolescent has mobility, sensory, functional, and communication limitations. The DVD begins with Elliott describing his background and the approaches that guide the treatment. Elliot has experience in educational psychology and health psychology. This experience is most apparent in his conceptualization of the treatment approach he describes as a social problem-solving model. His approach to working with caregivers blends several therapeutic models. The therapist must have a good understanding of the principles underlying cognitive-behavioral therapy and supportive therapy. Also, the therapist must be versed in the health condition or disability that affects the caregiver's relative. A solid knowledge of the health care environment, including the infrastructure, the support services available, and the obstacles or challenges the caregiver is likely to face, is important for the therapist.

Elliott explains that the social problem-solving model arises from a traditional cognitive-behavioral perspective. The therapist elicits information from the caregiver about his or her beliefs associated with caregiving and then helps the caregiver to challenge those beliefs that are likely to be less productive or even distressful for the caregiver. For example, in the case study presented, the caregiver describes feelings of guilt she experiences as a result of her son's illness. Elliott gently probes the mother to explain the

thoughts and behaviors that contribute to her feelings. The mother explains that she believes that something she did caused her son to have cerebral palsy. Elliot then uses a cognitive–behavioral approach to help her assess the validity of this belief. To be successful with this Socratic approach, the therapist must have some knowledge of the disorder. Through a series of questions, the mother acknowledges that there is evidence that contradicts her belief that something she did caused her son to have cerebral palsy. The viewer has the sense that although the mother recognizes contrary evidence that she caused her son's health problems, this topic will need to be tackled throughout therapy. Furthermore, the viewer may surmise that the mother's feelings of guilt contribute to her experiencing significant feelings of depression that are most evident when she describes a past suicide attempt.

In addition to a nonjudgmental, empathic stance associated with supportive therapy and the gentle challenging approach commonly used in cognitive–behavioral therapy, Elliot also relies on psychoeducational strategies to educate the caregiver, and he uses directive problem-solving to help the caregiver address immediate opportunities for change. Elliot states that these problem-solving strategies can be taught in the context of a group or psychoeducational setting. To be effective, the therapist must have a social worker's knowledge of the various support services and potential obstacles facing the caregiver. Because many persons living with chronic health conditions rely on multiple health care providers, Elliot recognizes the importance of understanding the potential interactions among services. Finally, Elliot assumes a social perspective by helping the caregiver identify how the caregiving role influences the other social roles within his or her life.

*Caregiving* would be a helpful training tool in graduate-level health psychology courses and medical school seminars or for social workers interested in working in a health care environment. The main ideas are presented in broad strokes, resulting in a video that has

wide appeal to providers and aspiring providers across disciplines. Many of the ideas could be used outside the context of traditional therapy. For example, physicians may gain ideas on how to conduct a basic assessment of the impact of caregiving on their patients' primary providers (e.g., a parent). Although the physician may not be equipped to fully explore the stress associated with caregiving, he or she would be better able to help caregivers in crisis or refer caregivers for necessary services. For the aspiring therapist, the video provides an excellent starting point for working with caregivers. Therapists will gain a conceptual framework for practice from the video. The therapist should then continue his or her training by filling in the framework with a combination of additional readings, consultations, and supervision.

In short, *Caregiving* provides a useful foundation for those therapists and other health care providers who work with persons living with chronic conditions and their caregivers. This engaging video synthesizes several therapeutic strategies into a cohesive framework that can be used for therapy treatment planning and short-term interventions. Most important, the video highlights the need to recognize the stressors facing caregivers and the potential adverse effects of caregiving. The viewer quickly recognizes that without an intervention, the overburdened caregiver may lose perspective, become isolated, or feel depressed and could be less effective in his or her role as caregiver to a chronically ill individual.

---

## Reference

- Machamer, J., Temkin, N., & Dikmen, S. (2002). Significant other burden and

factors related to it in TBI. *Journal of Clinical and Experimental Neuropsychology*,

24, 420–433.

PsycINFO

Article

---

PsycCRITIQUES

August 15, 2007, Vol. 52, Release 33, Article 184

1554-0138

[© 2007, American Psychological Association](#)