

MODULE 1: KENDRA
INT OFFICE SPACE

SCENE OPENS ON A WOMAN TALKING INTO THE CAMERA.

The woman is African American and in her early to mid-40s. She is wearing a white or ivory colored top to signify her caring yet worried nature.

When viewers first see the woman, she's already been speaking (low sound). Her voice reveals a certain weariness caused by months of constant worry. She uses many hand motions to emphasize her exasperation (e.g., "you *HAVE TO* take better care of yourself").

KENDRA

I love my aunt but ... She says she's managing her sugar, but I know she isn't. Two weeks ago she passed out in the middle of the sidewalk. She was so embarrassed. [Pause.] I keep telling her she must take better care of herself. I put healthy food in her fridge, I make sure she has her medications, but she has to do some things herself!

THE CAMERA FRAME EXPANDS.

The widened frame reveals the woman, Kendra, is surrounded by other caregivers sitting around a table at a support group meeting. On the table is a sign-in sheet and pen.

To Kendra's immediate right is Jasmine, the support group leader, a Latina woman in her mid-50s. Jasmine is a former caregiver for her mother. She has a counseling background and leads the Caregiver Support Center. Jasmine wears dark green, suggesting her knowledgeable and reliable nature.

To the right of Jasmine is Diana. She is a white woman in her mid-50s. Diana wears mostly black. Her body language is reticent towards the group.

On Diana's right is Sue, a Chinese-American woman, also in her mid-50s. Sue wears light blue, representing here optimism and energy.

To Sue's right (Kendra's left) is George. George is a white man in his mid to late 70s. His clothing suggests an upper-middle class status (e.g., shirt collar, watch). George wears dark blue, a nod to his independent streak and managerial style.

(Order: Kendra, Jasmine [one side of table] Diana, Sue, George [other side of table].)

Jasmine, hands resting flat on the surface in front of her, speaks directly to Kendra in a reassuring voice

JASMINE

A lot of caregivers face situations like yours. It is great that you reached out for support.

Kendra shrugs, shakes her head, and clasps her hands together. Her gestures continue to punctuate her speech.

KENDRA

Our aunt doesn't have any children. My sister stops in once a week. But she's not around enough to notice Aunt Carla's soda habit, or that the same dishes in the sink for days. It all falls on me.

Others are nodding. Sue leans into the table, hands flat on the surface, fingers reached out and "pointing" towards Kendra. Her voice is authoritative.

JASMINE

In this group, we often talk about "refilling your cup". We say it to remind each other that you have to take care of yourself in order to take good care of others.

To clarify her point, Jasmine holds her hands in towards her body at "yourself" and motions outwards at "others," as if offering something in her palms.

Kendra finds the advice a bit irritating, perhaps indulgent. When she responds, her voice is louder than necessary for the small group. Although she finds the advice unrealistic, she tries to mask her frustration with humor.

KENDRA

That sounds nice! But between working and helping my aunt, there's not a lot of time left!

My sister does as much as she can. She works full-time and is raising my nephew.

Continuing, Kendra's voice becomes higher, almost hopeful-sounding.

KENDRA (CONT'D)

I need help in motivating her the right way.
Perhaps it seems I'm just nagging to her and
she's been defiant or something.

Diana shakes her head at Kendra's forced optimism. She crosses her arms and leans back in her seat.

DIANA

Don't assume things are going to get easier.
There's always another hurdle with caregiving.
Always.

Jasmine attempts to soften Diana's warning, not wanting Kendra to become more anxious than she is already. Still, she reiterates Diana's realistic attitude.

JASMINE

Don't blame yourself. Managing chronic
conditions is tough. Overcoming being in denial
is your first step. I have some information for
you on Type 2 diabetes management you
should read and share with your aunt to help
motivate her.

Jasmine pulls the sign in sheet towards her, turns it over, and jots down a note.

Kendra presses her hands against the sides of her head, the tips of her fingers on her temples. She briefly closes her eyes before venting her response.

KENDRA

My head hurts just thinking about the future!
I'm trying to get all the legal stuff in order for
her-- power of attorney, and all that-- but I have
no idea how I'll manage.

JASMINE

But Type II diabetes is not a death sentence if
managed. There will be bumps in the road, but
you can prepare yourself for these.

Kendra likes this direction, and looks hopeful.

SCREEN FADES ON
JASMINE

In reverse type on black screen, three points fade in. They remain on the screen for 15 seconds.

"Kendra's sister promises to research how to set up a power of attorney.

Kendra sets more realistic expectations about her aunt's future health and care needs.

Kendra continues to go to the support group, where she can get help finding solutions when faced with new challenges."

MODULE 2: RENEE

INT. JASMINE'S OFFICE

SCENE OPENS ON JASMINE SITTING ACROSS FROM AN OLDER WOMAN. Renee, is a 65-year-old Native Hawaiian woman who is caring for her husband, in his early 70s. She wears neutral tones (browns, maybe complimented with a dusty pink or green), symbolizing her inhibition at approaching services and her worn out state.

During the conversation, Renee frequently shifts in her seat. She is uncomfortable reaching out for help, yet her back is straight as though she is "eager to please." She appreciates Jasmine meeting with her. She is generally "to the point" to avoid wasting her time, but shows some hesitancy when discussing Don's fall.

JASMINE

When you called on Monday you said your husband tried to get out of his chair, stumbled a bit and broke his hip, and he is in rehab now. You said he was diagnosed with Alzheimer's Disease.

Renee is shaking her head yes.

JASMINE (CONT'D)

Are you the only person providing care for your husband? Do you have any help?

Renee responds with more confidence. Her next words sound both genuine and rehearsed.

RENEE

It's just me. Don takes care of me and I take care of him.

Jasmine nods and continues with her questions, searching for ways she can help Renee.

JASMINE

And when did you start providing more help to Don?

RENEE

After he was in the service, he had PTSD. Sometimes he'd get real irritable and suspicious. A few years ago, when we were at the VA, I pulled the nurse aside and told her, you know, [pause] something's changed . . . [trails off]

JASMINE

When he got the diagnoses of Alzheimer's and Post Traumatic Stress Disorder, did that give you clarity on the changes you were seeing?

Renee sits up a little straighter and speaks with more assuredness. She recognizes a window to share her main concerns with Jasmine.

RENEE

It explained why his memory was slipping. But now it's hard to say. Like the suspicion. He accuses me of messing with his pills. He convinces himself that's why his brain is all wrong.

Jasmine is nodding.

JASMINE

When one of these episodes occurs-- where he gets upset--what do you do?

RENEE

I can't reason with him, so I just ignore him. That's my one weapon. Sometimes, I go in my room and close the door.

Jasmine's eyes widen momentarily. The client's description of her disengagement as a "weapon" is alarming. The calm in Jasmine's next words is intentional. She doesn't want to lose the client's trust by stigmatizing the questionable behavior.

JASMINE

And that's been effective in the past?

Renee appears unaware of Jasmine's concern, and talks openly about her way of handling Don's paranoia. If a friend were asking for relationship advice, Renee would likely share her "cold shoulder" strategy.

RENEE

It keeps the peace.

Jasmine pauses, choosing her next words carefully.

JASMINE

Renee, it might be time to find new ways to handle rough patches in your marriage. Don's a lot more vulnerable nowadays. Leaving him alone or ignoring him can cause further complications, like him falling.

Jasmine pauses again, quickly conceding an exception.

Unless, of course, you feel threatened, then it is smart to find a safe place and call for help.

Renee's immediately rebuffs the possibility that she's the victim of domestic violence.

RENEE

I don't think he'd hurt me. Not physically. But some of his accusations get under my skin.

Renee's hands are now folded into two fists in her lap.

RENEE (CONT'D)

I just don't know what to do. I feel awful saying it, but I wish he would stay in rehab. I don't want him to come home!

Renee closes her eyes when speaking the last words.

Jasmine stays quiet while her client gathers herself.

Renee pulls a tissue from her purse, sitting at her side, and blots her eyes with it, teary after her minor outburst. She squeezes the ball of tissue.

JASMINE

Have you ever talked about nursing home placement?

RENEE

I toured a place a few months ago, but I'm his wife. I didn't return their follow up calls. I promised him till death do us part.

Renee unravels the tissue from her hand, using it again to dry her eyes. Jasmine offers her a box of tissue from her desk. Renee smiles gratefully, takes one, and uses it to wipe under her eyes.

JASMINE

A lot of caregivers make that promise without knowing how much help their family member needs. Renee, were you nearby when Don fell?

RENEE

I went to lie down for a few minutes. He was up all night, and I was worn out. And then, WHAM! (Renee claps her hands on her thighs to emphasize the loud sound she's describing.)

JASMINE

When my mom was living with me, she would get up during the night and wander. One day, I told my brother about how I poured orange juice into mom's cereal after getting 2 hours of sleep that morning. I meant to make him laugh. But then he asked me, Can you really take care of Mom in that condition?

Renee latches on to the opportunity to make light of the situation. Jasmine's understanding is a relief.

RENEE

If I told you all the ridiculous things I've done because I'm so tired, we'd be here all day!

Jasmine continues. She's adamant about making her point.

JASMINE

But my brother's question was a wake-up call. It was not safe for me to watch mom. We ended up hiring a home care assistant to come a few times a week at night so I could get a good night's sleep.

RENEE

I don't know if Don would like someone coming into the house.

JASMINE

You might also look at adult day care as respite for you.

JASMINE (CONT'D)

Our support group meeting is tomorrow.

RENEE

It's in my calendar. I'll be there.

Jasmine hands over the folder to Renee.

JASMINE

Great! While you look through all this, I think the support group tomorrow might give you more insight on how they have managed their love ones.

Jasmine hands over the folder to Renee.

Reverse type on the screen: "To be continued." Fade to black.

MODULE 3: RENEE II

THE SCENE OPENS ON JASMINE INTRODUCING RENEE TO THE SUPPORT GROUP. THE ROOM IS SET UP AS IT WAS FOR MODULE 1, WITH ONE MORE CHAIR. RENEE NOW SITS NEXT TO JASMINE, AND KENDRA IS ON JASMINE'S RIGHT SIDE.

Jasmine appears in her usual dark green clothing, and the other caregivers wear the same colors as they did at the first meeting. Renee again appears in neutral colors. The table has a sign in sheet on it, just like in Module 1.

JASMINE

I want to introduce everyone to Renee. Renee can you tell the group about yourself?

RENEE

Hello. I take care of my husband. He has Alzheimer's Disease. Now he's also recovering from a broken hip. What else can I tell you?

Renee's words are stilted. She might be uneasy with all eyes on her.

JASMINE

What brought you here today?

Renee's voice becomes more assured and natural-sounding as she focuses/fixates on Don's erratic behaviors. Renee could go on listing grievances.

RENEE

I reached the end of my rope. I can't get any sleep because he gets up at night. He doesn't talk anymore. He yells. He thinks everyone is out to get him, including me.

Sue cuts in.

SUE

Do you notice a pattern? With my mother-in-law, when we stray from her routine-- when she sleeps, showers, eats-- she becomes irritable. Her routine keeps her calm.

Renee emphasizes the rigid schedule by hitting the side of her right hand on her left palm (chopping motion).

RENEE

He has his schedule: Breakfast at 8, pills at 9. I notice when he has a drink or two, he gets riled up. But I don't want to treat him like a kid and say he can't have a beer if he wants one.

The room is quiet. The other caregivers aren't quite sure what to say, and are perhaps uncomfortable responding to the new information.

Kendra breaks the silence.

KENDRA

You know (pauses and smiles, using a humorous tone). . . My aunt's diabetic and doesn't take great care of herself. So when my aunt asks me to pick up cookies or soda, sometimes I "accidentally" [makes air quotes] forget. I don't totally deny her, but I don't want to be a part of her sugar levels going all over the place.

Sue smiles knowingly, while George and Diana nod.

Jasmine latches onto the lighter tone set by Kendra's coyly presented example. Her enthusiasm comes through in her larger than usual hand motions as she elaborates.

JASMINE

That is a great strategy! We call it "compassionate fibbing" or "love lies." Sometimes a person with dementia cannot understand the consequences of their actions. A well-meaning fib can go a long way. Especially if Don's balance is already shaky, a drink could make it worse.

GEORGE

Sometimes with my wife--she also has dementia--I redirect her attention. She gets worried about little things, and starts asking the same question. What time will Michael--our son--be over? Did she take her medication? Over and over! So I answer, then I look at the paper, and say, "Linda, did you hear about this?"

George picks up the sign in sheet, pretends to look over it, and points to an imaginary headline.

RENEE

That's probably something I could do more of, compassionate fibbing.

JASMINE

You also talked about looking at nursing home placement.

Jasmine looks around at the other caregivers, looking for someone to respond. Her eyes return to George more often than the others. Kendra finally speaks up.

KENDRA

Just don't wait until it's too late to decide. Whether it's having someone come into your home or placement.

JASMINE

Also keep in mind that caregiving does not end when someone moves to a residential facility. They will still need you.

Jasmine turns away from Renee and looks back around at the group. Her eyes land on George.

FADE TO BLACK.

In white text on black screen, four points fade in.

Renee schedules a home care assistant to come for a few hours in the afternoon so she can nap. She tells Don the service is to keep the house tidy.

Renee writes a list of activities she can use to distract Don if he becomes aggravated, including looking through old photos, driving around town, or watching television together.

She talks to her son and a close friend about nursing home placement.

MODULE 4: GEORGE

THE SCENE OPENS WITH GEORGE WALKING THROUGH THE DOOR AND INTO THE SUPPORT GROUP

The other caregivers, already seated, are chatting when George arrives. Renee, Kendra and Jasmine stop their conversation and look up when George walks in. Diana and Sue glance up momentarily but turn back to looking at Diana's phone.

GEORGE

Sorry I'm late! I got in a little fender bender.

George pulls out the chair at his usual spot and sits down. Diana puts her phone back in her purse under the table.

George pulls his chair forward, closer to the table.

GEORGE (CONT'D)

I'll try to keep it short. You see, this weekend my kids ganged up on me. They want to throw Linda and me into a retirement home!

George's voice is raised at the last part. He has a look of hurt and abandonment.

JASMINE

Did they say why?

GEORGE

An assisted living joint.

George makes a face. It's the same to him.

He is preemptively defensive.

GEORGE (CONT'D)

They think it will make things easier for me. Sure, caregiving's no walk in the park, but Linda and I get by! We probably eat out a little

more than we should, but Linda is fed. And she's happy.

Sue breaks the tension. Sue taps her left fingers with her right index finger listing the benefits of assisted living.

SUE

If you ask me, some of these assisted living places sound nice! Someone else prepares your meals, does your laundry, and drives you around town

Sue waves her hand in a circle listing off each amenity. From someone else this, this might sound patronizing. But not from Sue, a working mom.

George shakes his head emphatically, even though appears to agree that there are benefits.

GEORGE

I know, I know, but we're not there yet. And how would my kids know what kind of help Linda and I need? They're never around. (George's voice becomes deeper at the word "really.") When I said that, then they really laid into me! (The next part sounds like the start of a rant.) Suddenly it wasn't just about their mom. It was how much we drink and my driving.

Sue cuts in, looking directly at George.

Georges voice becomes deeper at the word "really." The next part sounds like the start of a rant. Sue again cuts in, looking directly at George.

SUE

Do you think they're just worried?

George is a bit restrained in his response, due to his ego.

GEORGE

I think they like trying to control us.

The line is said with an edge.

JASMINE

How do you think things are going now?

Jasmine "points" to George with her hands, her palms pressed together, at the word "you."

GEORGE

It's not easy. Lately she's on my case whenever I leave her alone for a few minutes. She accuses me of having an affair. The past won't stay in the past, if you know what I mean.

He gives a telling look.

GEORGE (CONT'D)

Then I ask her, "Linda, when the hell would I have time?!"

The other caregivers are silent and remain still. Quick cut to Renee who is nodding, yes. She is familiar with how complex marriage to someone with dementia can be.

Jasmine addresses George. She is both soft-spoken and authoritative.

JASMINE

Remember, it is the disease that is talking. It might be that she is feeling anxious. It might help to reassure her by telling her how much you love and care about her, or holding her hand.

Still looking at George, Jasmine tries to cautiously return to the matter of assisted living.

JASMINE (CONT'D)

Do you think getting more help could lighten the load?

George's shoulders sink, perhaps feeling a bit defeated from his children's encouragement.

GEORGE

Maybe. We do have someone coming in a few times a week to help Linda shower. It's helped a lot.

His momentary concession, however, quickly gives way to a renewed sense of anger.

GEORGE (CONT'D)

But, what about me? I don't want to follow all those rules those places have.

George throws his hand out and makes a face, offended by the idea of moving to a place that restricts his freedom.

Diana, emboldened by her extensive experience with family conflict, makes a suggestion.

DIANA

What about setting up a family meeting where you, Linda, and the kids can talk it through? It can help get everyone on the same page. That's what my siblings and I did when my dad became ill.

Jasmine turns to George.

GEORGE

I'll have a conversation, but don't want to be steamrolled again!

Jasmine makes a practical suggestion, rather than focusing on the unfair treatment George is describing.

JASMINE

Maybe the first step is to set up some rules beforehand. We have a list of ideas for "ground rules" to get you started.

Cut to Diana, appearing more engaged than usual, endorses the resource.

DIANA

I have that list tucked away in my memory bank. One point I liked in particular was using "I" statements. You might say, "I feel like you're ganging up on me," rather than "You're ganging up on me." That tends to go over better.

Cut to: Kendra is leaning into the table, eager to share her experience.

KENDRA

And no bringing up the past. Stay focused on the issue you agreed to talk about.

Cut to Jasmine.

JASMINE

If you'd like, I can help facilitate.

Cut to George. If George feels "steamrolled" by the influx of advice, he doesn't show it. It's possible he knows at some level it is valuable.

GEORGE

I don't know how helpful it'll be, but we can give it a try.

Jasmine turns to George, and matter-of-factly lays out next steps.

JASMINE

Let's look at some dates after the meeting, and we can reach out to your kids.

SCREEN FADES TO
BLACK

In reverse type, the following points fade in.

At the family meeting facilitated by Jasmine, George agrees to visit an assisted living community with his son Michael. During the visit, Michael agrees the setting is too restrictive.

Instead, the family finds an independent living community with transportation options so George doesn't have to drive.

In his new community, George finds other ways to cope with his stress besides drinking. When the home care assistant is helping Linda-- everyday now--George visits the community clubhouse and plays pool with his new neighbors.

Module 5: Manuel

Ext.

THE SCENE OPENS ON MANUEL, WHO IS PICTURED IN AN OUTDOOR SETTING WITH FOLIAGE, BENCHES. IT LOOKS LIKE A PARK.

Manuel is a Hispanic male in his late 20s. He is wearing gym shorts/workout clothes. His top is red. Red represents his anger at the situation he finds himself in, but also his tremendous love/sacrifice for his family.

The scene begins with Manuel dialing a number from his cell phone. While he waits for someone to pick up, Manuel takes a drag off of a marijuana stick.

THE SCREEN SPLITS INTO TWO. ONE SIDE OF THE SCREEN SHOWS MANUEL (LEFT). ON THE OTHER SIDE OF THE SCREEN (RIGHT), JASMINE IS AT HER OFFICE DESK, SHOWN PICKING UP THE PHONE. ON THE DESK IS NAME PLACARD, JASMINE (LAST NAME TBD), MSW.

JASMINE (CONT'D)

Hello, this is the Caregiver Support Program,
how may I help you?

Manuel's voice reveals his uncertainty about calling. He pauses often, and speaks in choppy sentences.

MANUEL

Hi, I'm calling about the, Respite program? It's
for my mom. She takes care of my dad, who
has Parkinson's disease.

He puts out the marijuana and pulls out a pack of cigarettes. He takes out a cigarette and holds it in his hand.

JASMINE

I'm Jasmine, the Caregiver Support Program
director. Can you tell me more about yourself?
What is your name?

Manuel sits down at a bench. He leans forward, resting his elbows on his knees, holding an unlit cigarette. He sounds a bit depressed.

MANUEL

Yeah, my name is Manuel. I think the doctor
said that dad's in Stage 4 of Parkinson's
Disease. He can't be on his own anymore. I
moved in with them about 3 months ago to
help when my mom's at work.

He fidgets with his lighter.

Jasmine listens intently and jots down a note.

JASMINE

How many hours a week are you helping your
dad?

[Manuel's voice continues to sound a little depressed] He unfolds himself, and leans back.

MANUEL

Pretty much all the time. Even when my mom is home, she wants me to be right there in case he falls.

Jasmine is nodding, fiddling with the pen she is holding.

JASMINE

Do you ever get a break?

MANUEL

On Saturdays I get out and play a pickup game of soccer with some friends, but that's it.

JASMINE

Do you have any hobbies or other activities you used to do before you moved back in with your parents?

MANUEL

Not really. My mom acts like she's supportive of me going out, but when I do, she puts me on a guilt trip and says I'm never around.

Jasmine sets down her pen and intently leans into the speaker phone. Her voice becomes concerned.

JASMINE

Overall, how have things been since moving back in with your parents?

Manuel hesitates, as if thinking through how transparent he wants to be. His frustration, thinly masked before, is apparent now.

MANUEL

Not good. I'm tired of being called selfish. I gave up everything--my apartment, my job, my life-- to be here. I, I wish this would all end for dad, so I can have my life back.

His one leg is anxiously tapping the ground. He takes a deep breath and sits up.

Jasmine is intently listening, pausing a moment before speaking.

JASMINE

I'm sensing that you feel your parents do not appreciate you?

MANUEL

Yes, definitely. I drink a couple of beers a night to relax. But sometimes we get into arguments about my drinking.

JASMINE

May I ask, how old are you Manuel?

MANUEL

I'm 26. But drinking . . .

Manuel again shifts. He taps his one foot incessantly on the ground.

MANUEL (CONT'D)

But drinking takes my mind off everything. I need that. Then just one time--ONE TIME!-- I forgot to take dad to an appointment. Now every time I say something they don't like, they ask me have I been drinking again.

Jasmine circles back around to his original request to seek respite for his mom. She smiles when she talks, taking the conversation in a lighter direction.

JASMINE

Besides your mom, I think perhaps you too might need respite, Manuel!

Jasmine's facial expression and body language are in a take charge mode.

JASMINE (CONT'D)

Caregiving can seriously change family dynamics, and sometimes it helps to clarify expectations and boundaries.

Manuel nods and runs his fingers in his hair, from his forehead to the back of his head.

MANUEL

Okay.

JASMINE

I'm going to suggest that you write down what would allow you to reduce your frustrations with your parents, and ask your parents how to support you.

With a lump in his throat, warding off crying, Manuel looks up and sighs. He's skeptical of the suggestion.

MANUEL

I don't want to be called selfish, or told that I'm not there for the family.

JASMINE

It's okay to tell your parents that you didn't realize the overwhelming responsibility of taking care of your dad. By being honest, it's less likely that this will come out in a hurtful way. You may want to speak with them about a part-time caregiver if their budget allows.

Manuel is nodding, considering the idea.

MANUEL

I can give it a shot.

JASMINE

And I can send you some information on communication techniques you can use with your parents, and some ideas for healthy ways to lower stress. We can also talk about respite services. It might take a few tries, but I think you have an opportunity to make a hard situation a little more manageable.

The audio fades before the visual. You can see Jasmine continue to talk to Manuel.

HOLD SCREEN
SHORT ON
MANUEL. FADE TO
BLACK

"In reverse type on a black screen, the following points fade in.

Manuel explains to his parents that the family needs a professional caregiver to relieve him a couple of days per week.

After their conversation, Manuel's mom is less critical and more appreciative of her son's help."

MODULE 6: SUE

THE SCENE OPENS ON SUE CHATTING WITH KENDRA AT THE SUPPORT GROUP MEETING PLACE. YOU CAN HEAR THE SOUND OF OTHERS WALKING INTO THE MEETING DURING THEIR CONVERSATION.

Sue comically pulls her hair.

SUE

There are days when I say to myself, "What was I thinking?! Why did I agree to this?"

Sue comically pulls her hair.

Diana nods emphatically.

CUT TO: DIANA

Been there!

SUE

I do it because I love my husband. That's it.
(Sue waves her hand to emphasize "That's it,"
as if there's no other reason.)

Wide shot of people at the table low chatting.

JASMINE

Sue, would you like to start today?

The group quiets down.

CUT TO: SUE

Sure! It's more of the same really.

Sue directs her words at Kendra and Renee, who are still relatively new to the group and lack context.

SUE

My mother-in-law moved in with us almost two years ago. She was living with my father-in-law in Beijing. After he passed, she came to visit during the Chinese New Year. That's when my husband and I realized she couldn't live alone anymore.

JASMINE

How have things been recently?

Sue looks over at Jasmine.

Cut to: SUE

CUT TO: SUE

Frustrating! On Friday, she decided to clean the kitchen cupboards. She pulled everything out then took a break part-way through cleaning and did not finish, and when I came home it looked like a hurricane hit my kitchen!

Sue and Diana are friends.

CUT TO: DIANA
(humorously) That's relatively minor for her!

Diana says this humorously. Sue and Diana are friends, and it shows through Diana's unusually personable, less filtered reactions to Sue's story.

She raises her index finger at Diana.

CUT TO: SUE
Oh, but wait! When I confronted her about it, she ignored me! She wouldn't even look at me. Then, when we sat down for dinner, she looks around and says (Sue imitates her mother-in-law looking around judgmentally). (Imitates a Chinese accent) "This place is a mess! How do you live like this?"

Wide shot: The other group members are laughing.

Sue shrugs her shoulders saying this, indicating acceptance.

CUT TO: SUE (CONT'D)
I had to laugh at that point. What else do you do?

CUT TO: RENEE
It beats crying about it!

Cut to: Jasmine turns to Renee.

JASMINE
You do that too Renee? Let yourself laugh when things are tough?

CUT TO: RENEE
Sometimes I can't help it. Like when Don was trying to change the television with my cell

phone. I had to hide my face so he wouldn't feel embarrassed!

Renee smiles widely recalling this memory.

Sue looks towards Renee.

SUE

Well, you know the kinds of crazy situations you get into with dementia? On top of that, my mother-in-law is from China and doesn't always understand U.S. culture. A few months ago, I made fondue to get my boys to trying something new. She looked at it and said [Chinese accent while looking into an imaginary pot with disgust.] "You should throw away that hot pot!"

Wide shot: The other caregivers are laughing. George covers his face, his shoulders shake with laughter.

Sue continues in a more serious tone, her usual exuberance gone.

SUE (CONT'D)

Sometimes it's not as funny. She can be really mean. I'm not the daughter-in-law she wanted, and she lets me know at every opportunity.

GEORGE

You can't take it personally.

CUT TO: SUE

The hell I can't. I know, I know, but even if she didn't have dementia, she'd probably say the same things! The only reason it's never been an issue before is because she lived in China. Sometimes she gets the better of me, and I snap at her. I know I shouldn't. It doesn't help, and she gets upset when I fight with her, and my husband gets upset with me.

Sue leans back in her seat and folds her arms across her body. She twists her seat from side to side, perhaps uncomfortable admitting these slips in her patience.

CUT TO: JASMINE

I wonder if this might be a way for her to feel that she is in control. She is still mourning the

loss of her husband. Perhaps she feels homeless in a sense.

Sue unfolds her arms and nods in agreement.

SUE

I think that's part of it. I feel bad. When I feel my blood start to boil, I try to focus on the good, and that helps. My kids are getting to know their grandmother. My husband feels better knowing his mom is safe. And, maybe it's old fashioned, but I feel closer to my culture. I was raised in the U.S., but taking care of my mother-in-law makes me feel more Chinese. If she were around still, I know my mom would embrace her.

CUT TO: JASMINE

That's not a bad idea. Pausing and focusing on the positive can help when you want to lash out. And sometimes it helps to have a reminder of what those positive things are!

Jasmine turns to Diana

FOCUS ON DIANA.
THEN FADE TO
BLACK

In reverse text on black screen, three points fade in.

Sue writes down the positive affects her mother has on the family.

Sue engages her mother-in-law to feel more useful around the household, including folding laundry, cutting vegetables for dinner, and washing dishes.

MODULE 7: DIANA

THE SCENE OPENS ON JASMINE AND DIANA SITTING AT A KITCHEN TABLE.

Each woman has a mug in front of her. Otherwise the table is clear.

JASMINE

Diana, thank you for reaching out to me. How has it been for you and your mom after your dad's passing?

DIANA

Very tough. It wasn't until after he was gone I realized how much I needed him.

Diana grabs her mug on both sides. By the last line, she's staring down at that table, not at Jasmine.

JASMINE

In what way were things different when he was around?

Diana takes a deep breath in and sighs before answering.

DIANA

Dad was the peacekeeper. With mom, it's never been easy. Never. Dad was our buffer, you could say.

Jasmine looks at Diana quizzically.

JASMINE

What makes your relationship with your mom challenging?

DIANA

Everything I do is wrong.

Diana waves her hand in front of her, describing the all-encompassing nature of her mom's criticism.

She continues, her tone more leveled.

DIANA (CONT'D)

For the most part, I try not to take it personally. She's a deeply unhappy person.

JASMINE

Yes, try not to take it personally but it's tough, I know. Has her depression gotten worse since your dad's passing?

Diana nods while answering.

DIANA

Definitely. And I know it's a disease, but it's like she doesn't even try to do anything about it. She won't take her meds.

Diana throws her hand out in exasperation. The irritation in her voice suggests this is a conversation she's had many times with her mom.

Jasmine balls up one hand in a fist, signaling frustration.

JASMINE

What do you do when she's *really* getting to you?

DIANA

Sometimes I bite my tongue, but I not often enough. Last week we said a lot of mean things to each other. I told her, it's her own fault that she's so miserable.

Her hand motions become even less retrained.

DIANA (CONT'D)

I can leave her alone in her misery, if she'd like. No one else will come because they can't tolerate how selfish she is. I actually said that to her.

Diana stops and looks away, reflecting on the argument.

Jasmine remains quiet while Diana recounts the incident.

JASMINE

Why do you think your mom is selfish?

DIANA

I know some of it is the depression. I *know* that, but she can be so hurtful.

Diana presses her palm against the table for emphasis.

Jasmine reaches out her hand on the table as well, a gesture meant to show understanding.

JASMINE

This is quite a challenging situation you are in, and I'm really glad you called. Has it gotten to the point where you are physical with each other?

Diana doesn't appear surprised at the question.

DIANA

No, but it's crossed my mind. I'm worried one day I might justÉ (Diana appears conflicted on what word to use.) snap.

JASMINE

That can be hard to admit. Do you have a "game plan" for when that crosses your mind?

DIANA

No, not exactly.

JASMINE

Here's what I would suggest: just walk away.

DIANA

(sadly breathing a sigh of anguish) Yes

JASMINE

Just walk away for a few minutes and let the tension go away. You might call someone, too. Do you have a support system?

Jasmine takes a sip from her mug to allow Diana to think.

DIANA

My mother's sister, aunt Connie. She's always there for me. She was the person I came out to before I told my mom!

JASMINE

Perfect! Ask her if she minds being your "go to" when things get tough.

Jasmine gestures as if to say "There you go!" when she learns about Diana's trusted aunt.

Diana nods, agreeing with the suggestion.

DIANA

Yes. I know she'd rather that I call than to see us fighting and not getting along. Besides, I really don't want to ever hit my mother. I'd rather leave than hurt her.

JASMINE

Of course, and have you ever thought about attending therapy again to manage some of the

stress? It might be worth making another appointment. Sometime caregivers don't reach out for help because they don't think things are "bad enough" yet.

DIANA

Therapy helped me through losing my dad. I need to start up again. It seemed unfinished when I stopped going. The support group has helped too.

JASMINE

We're glad you're back now!

Jasmine pulls out a folder from a tote bag at her side and opens it.

C/Up: She pulls out flyers on "Managing stress" and "Self-care."

AUDIO AND VIDEO
FADE OUT TO
BLACK SCREEN

In reverse type on black screen, three points fade in.

Diana reaches out to her aunt for support to reduce tension between her and her mom.

Diana takes daily walks to clear her head before she sees her mom.

Diana sees a therapist weekly to address stress, grief, and depression.

(NOT SURE IF WE WILL INCLUDE:)

MODULE 8: WRAP UP

JASMINE IS SHOWN AT HER DESK. SHE IS TALKING INTO THE CAMERA.

JASMINE

Congratulations! You've spent that last few weeks taking the time to "refill your cup." By listening to other caregivers, you've learned how to cope when faced with challenges in your caregiving relationship.

The screen fades to black. The words, "Module 1" appear in the center of the screen and fade. The right half of the screen remains black. The words "Module 1 Notes" (underlined) appear at the top of this side.

On the left side, footage from Modules 1-7 play while V.O. of Jasmine.

(V.O.) JASMINE

In Module 1, you heard from Kendra. Kendra's diabetic aunt struggled to take care herself, and Kendra was feeling overwhelmed. In this module, you learned about the need to "refill your cup," set up realistic expectations for care, and the importance of asking for help.

As Jasmine is talking, the following bullet points appear on the right side of the screen: "Refill your cup (i.e., take care of yourself); "Set up realistic expectations"; "Let others know if you're struggling and ask for help."

Transition to the words, "Module 2" appear in the center of the screen and fade.

The right half of the screen remains black. The words "Module 2 Notes" (underlined) appear at the top of this side.

On the left side, footage from Module 2 plays while Jasmine's voice talks over it.

JASMINE

In the second module, you heard from Renee. Her husband's progressing Alzheimer's Disease meant that her old ways of coping with stress--leaving Don alone for long periods of time or ignoring him-- were no longer safe and could be hurtful. To stay safe, she hired a home care assistant so she could rest in the afternoon.

The following bullet points appear on the right side of the screen: "Remember the person you help may be vulnerable"; "Reflect on whether you're in a state to provide care safely"; "Find safe ways to take a break".

The screen fades to black. The words, "Module 3" appear in the center of the screen and fade. The right half of the screen remains black. The words "Module 3 Notes" (underlined) appear at the top of this side.

On the left side, footage from Module 3 plays while Jasmine's voice talks over it.

JASMINE (CONT'D)

When she came to support groups Renee also learned strategies like "compassionate fibbing" and redirection. These techniques are particularly useful when assisting someone with behavioral symptoms of dementia. For a refresher on these techniques, you can return to module 3.

The following bullet points appear on the right side of the screen: "Be creative when helping someone with behaviors symptoms of dementia"; "Compassionate fibbing is okay "; "Redirect attention to reduce or avoid annoying behaviors."

The screen transitions. The words, "Module 4" appear in the center of the screen and fade.

The right half of the screen remains black. The words "Module 4 Notes" (underlined) appear at the top of this side.

On the left side, footage from Module 4 plays while Jasmine's voice talks over it.

JASMINE (CONT'D)

In Module 4, George talked about a family conflict over his wife's care. A carefully-planned family meeting allowed everyone's voice to be heard. A move to an independent living community relieved some of George's stress. His kids also worried less about their parent's safety. After unwinding with his new neighbors, George was more patient. His support group peers reminded him to "blame the disease" when Linda accused him of having an affair, rather than lashing out.

The following bullet points appear on the right side of the screen: "Set ground rules for a family meeting"; "Find healthy ways to lower stress"; "Be honest with yourself if you need more help"; "Blame the disease."

The screen fades to black. The words, "Module 5" appear in the center of the screen and fade. The right half of the screen transitions to the words."Module 5 Notes" (underlined) appear at the top of this side.

On the left side, footage from Module 5 plays while Jasmine's voice talks over it.

JASMINE (CONT'D)

Next you heard from Manuel, who moved in with his parents to care for his dad with Parkinson's Disease. At first, Manuel didn't

realize how much help his dad needed. He began to resent how his parents gave him a hard time for taking a break, and said things he regretted when they fought. To prevent this, he suggested getting a professional caregiver support as a respite option. He also is more honest about his feelings to his parents. This helps to prevent arguments.

The following bullet points appear on the right side of the screen: "Set boundaries"; "Identify what you need to lower stress"; "Communicate clearly but respectfully."

Transition. The words, "Module 6" appear in the center of the screen and fade. The right half of the screen transitions to the words "Module 6 Notes" (underlined) appear at the top of this side.

On the left side, footage from Module 6 plays while Jasmine's voice talks over it.

JASMINE (CONT'D)

In Module 6, Sue shared her frustration while caring for her mother-in-law. We learned how Sue often relied on humor to handle her mother-in-law's criticism. She engaged her mother-in-law in activities around the household to make her feel "at home." When the criticisms became too much, the support group encouraged Sue try to see things from her mother-in-law's perspective and to focus on positive aspects of caregiving.

The following bullet points appear on the right side of the screen: "Find humor in tough situations"; "Step in someone else's shoes"; "Focus on the positive".

The screen fades to black. The words, "Module 7" appear in the center of the screen and fade. The right half of the screen remains black. The words "Module 7 Notes" (underlined) appear at the top of this side.

On the left side, footage from Module 7 plays while Jasmine's voice talks over it.

JASMINE (CONT'D)

Finally, in Module 7, Diana talked about her challenges while caring for her mother following her dad's death. When we talked, we agreed it was a good idea to set up an appointment for counseling before she reached her breaking point. We also set up a plan for when Diana felt like she might hurt her mother.

In those instances, she would walk away, and call her aunt.

The following bullet points appear on the right side of the screen: "It's never too early to get help"; "Walk away if you think you might hurt someone"; "Find someone to talk to". The screen fades back to Jasmine's office, where she's still seated at her desk.

JASMINE

Not all of these strategies will work for your unique situation. If you're trying to improve your relationship with the person you assist, I encourage you to give a few of these "tried and true" approaches a go. And remember, there's no such thing as a "perfect" caregiver, but you have tools to become the best caregiver you can be. That starts with taking care of yourself first so you are prepared to care for others with kindness and understanding. Thank you for joining me, and wish you the best on your caregiving journey!