Emotional Distance

Purpose of Session: Emotional Distance

The following session on Emotional Distance briefly describes a strategy to help a caregiver deal with feelings and to be objective in providing daily care over the long-term to a loved one.

Emotional Distance

Emotional distance involves setting aside for a brief period of time one’s own feelings and one’s own personal needs in order to attend more objectively to the needs of the person receiving care. Setting aside one’s feelings does not mean abandoning or shutting off personal feelings or the feelings for the person receiving care. It means being available on an emotional level and on a physical level in order to provide appropriate care in a caring manner. At the same time personal feelings are set aside temporarily to allow a focus on the immediate caregiving task such as changing someone’s soiled underwear.¹

Emotional Distance

A separation or distance between the caregiver’s feelings and the care receiver’s behavior and functioning in order to provide appropriate care.

Emotional distance involves separating the caregiver’s own immediate feelings about the loved one in their care and that person’s current functioning and behavior in order to provide appropriate care. Caregivers should remember that they are providing important care for someone, that they are acting in the best interest of the other person, and that emotional distance is just a technique to keep caregiving interactions positive, efficient, and successful.

The strategy of emotional distance is useful for a caregiver in providing daily care for someone with declining health, such as Alzheimer’s disease or a related progressive
memory disorder. The person who has a diagnosis of Alzheimer’s disease is not responsible for the failing health or declining abilities. That person may be putting forth best efforts to stay as self-sufficient, as helpful and as pleasant-mannered as possible. The caregiver may be putting forth best efforts to be available to provide assistance in as respectful and positive a manner as possible. However, in spite of the best efforts on everyone’s part, the person with the illness continues to decline. In spite of everyone’s best efforts, caregiver stress and fatigue build up, feelings mount or become entangled and interactions may become increasingly challenging, especially during personal care such as bathing.1

What Emotional Distance is Not
Emotional distance, as it is used here, is not being applied to mean that the caregiver should withdraw from, wall off, or deny their feelings and reactions. It does not mean that the caregiver should avoid emotional involvement with the person receiving care.

Emotional Distance Technique
The emotional distance technique develops a short-term separation from one’s own current feelings in order to stay pleasant, kind, and efficient while providing care. In a way the technique provides an emotional shield somewhat like developing a “thick skin” in order to concentrate on the immediate task at hand.2

<table>
<thead>
<tr>
<th>Learning the Emotional Distance Technique: Tips for Caregivers</th>
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<tbody>
<tr>
<td>1. Take 5 deep breaths to relax. Do this whenever you feel stress begin to build.</td>
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<td>2. Calm down your feelings and separate yourself briefly from your feelings and the feelings of the other person. Focus on the details and steps of the current task.</td>
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<td>3. Think only about the task you need to do now. Stay in the current moment.</td>
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<td>4. While providing care, occasionally look off into the distance for a few seconds to move away emotionally from the situation while actually staying in the same spot. Or, look at something near you that is pleasant, such as a picture or photo, a pattern on the wallpaper, clothing, or linen, the form of a table, chair, or lamp, or the branches of trees outside the window, to help calm and control your feelings.</td>
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<td>5. Visualize the next specific step in the task you are doing.</td>
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<td>6. Remember that the disease is not the fault of the care receiver or the caregiver.</td>
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<td>7. No one is perfect. Providing the best that you can do is the best care you can give.</td>
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<tr>
<td>8. Try music: listen to some music or sing out loud even old simple songs such as Happy Birthday. ♫</td>
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<tr>
<td>9. Recite a poem or retell a well-known story or fable while providing care.</td>
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In order to calm feelings that are building up, it may be necessary for the caregiver to take a brief break for a minute or more, to leave the room for a drink of water or just to be in a different room. This brief break can provide a moment to calm down, to put aside feelings that are welling up, to think of something positive in general or about the person receiving care, and to return to finish the care. Knowing that a personal care task must be done, the caregiver who has recovered the emotional distance can now be firm, objective, quick, positive, and calm while focusing on the caregiving tasks.

Reminding the person about a special treat may help the caregiver to complete the current task. An uncooperative person may relax upon hearing about a positive reward, such as spending time with a pet or favorite magazine, after a task is done. Thus, after the caregiver completes care tasks, the caregiver should schedule some time to relax. There should be a time for both the caregiver and care receiver to relax. After the care tasks are done, rewards should go to the care receiver and the caregiver, such as a special activity or treat. For family caregivers at home, a nap (even a cat nap) for each is a great reward!

**Dealing with Ongoing Health Changes**

Sometimes it is hard to separate the identity of the person from the disease that seems to be changing their personality and how they can function. But the disease is separate from the person. Even though the person may seem to be changing as time goes by, it is important to remember that the person is a loved one. The disease may be playing a stronger role in the characteristics, abilities, and behavior of the person and the person whom everyone knew before may seem to be disappearing. Despite such changes, that person still keeps their former identity though not their former roles and skills; however, Dad is still Dad and Mom is still Mom and they are still connected to the family.

It may help the family caregiver to remember the special former characteristics of the person especially the positive characteristics of personality before the onset of the disease. Stories about shared memories help provide links to the person’s current fragments of memory and thinking skills that still exist. The family caregiver(s) should think about the bigger picture of the loved one’s personality, which includes not only current abilities and interests but also previous abilities and preferences in activities, foods, music, stories, photos, and special interests. Remembering the person’s sense of humor, eagerness to help, good listening skills, and interesting conversations may strengthen the current sense of connection between the caregiver and the care receiver. The connections that existed in healthier times will remind the caregiver about their love for the family member who now is so different and in need of so much care.

**Some Words About Feelings**

*Caregivers: Feelings are Important!*

Feelings are what make us human. They are important to communication and an important part of our behaviors. Sometimes one feeling, that of feeling kind, may
surface. Sometimes there is a rush of different feelings such as feeling disrespected, anxious, fearful, and frustrated. Feelings often trigger quick reactions to the words of others. Sometimes it is a facial expression or simple behavior in others that arouses one’s feelings and leads to an instantaneous reaction.³

Some people, as they grow up, learn to or try to hide their feelings from others. Often they end up hiding their feelings from themselves. This habit may make their reactions a puzzle to themselves or to others.³

The constant responsibilities of caregiving and the fatigue from long-term caregiving can increase stress, a build up of feelings, and reactions that may be negative to the person receiving care. Honoring the feelings and then logically developing positive behaviors will help in the caregiving. Reactive behaviors that slow down the caregiving or increase the struggling behaviors of the care receiver should be avoided.

It may help to take a few breaths, leaving the task for a few minutes. Another suggestion is to break up the task, completing part of the task at different times such as half in the morning and the other half later in the day.

**Empathy**²⁻⁴

*Empathy* differs from emotional distance. *Empathy* is recognizing and feeling the emotional experience of others. *Empathy* grows from gathering information about another person’s body and facial expressions, tone of voice, and pace of words. At the same time, empathic persons know that the other person’s experience differs from their own experience, even in the same situation. There is a sense of knowing the other person’s experience and of caring about the other person and, at the same time, knowing that the emotion and experience belong uniquely to that other person.

Unlike *sympathy*, which involves a full emotional connection and being flooded with the emotion of the other person, empathy has some separateness. The empathic listener may feel the emotional experience of someone else yet listen objectively and provide support. The sympathetic person may be so overwhelmed by the other person’s feelings that they cannot separate their own feelings from those of the other person. As a result, sympathetic people respond to their own feelings and needs rather than the feelings and needs of others.³⁻⁵

Sometimes caregivers feel such empathy for their loved one that not only do they perceive the plight of their loved one, but also they may respond emotionally to the suffering of their loved one. In addition, the caregivers realize that the progressive decline will lead to more care, more suffering, more embarrassment and the frustration of not being self-sufficient. As they think about the time ahead, caregivers assume the stress of the future decline during the current stage of decline.
Sometimes caregivers try to make sense of why the disease occurred to that particular loved one and why the decline is so de-humanizing. They struggle with grief, not only grieving the slow loss of the loved one who has the diagnosis, but also, as time passes, a mounting grief in anticipation of the increasing struggle with loss and the additional burdens of caregiving.

Emotional distance includes the feeling of empathy, knowing what the other person is going through but having some amount of mild detachment from the feelings that other person is experiencing. Someone who uses emotional distance must remember to set aside a later time to process those empathic feelings. At a later time, the person comfortable with their emotional distance skill, can explore the variety of feelings that have surfaced. At that time later they can work to understand them and consider behaviors that would help them to get through that situation the next time around.3

**Research on Brain Activity**
Recent research examining areas of the brain with brain imaging (functional magnetic resonance imaging of the brain tissue) has shown that when people see another person’s emotion, the brain mirrors that emotional state in some way within the observer. Groups of brain cells and their connections become active in ways that make the observer undergo that observed emotion. In fact, the name of mirror neurons is used to capture the activity of brain cells that mirror actions, facial expressions and the emotions observed in others.6,7

Mirror neurons may be the reason or part of the reason why people who see emotions expressed in other people begin to feel similar emotions within themselves. A flood of sad emotions in others, even actors in a movie or television program, may lead to a flood of sad emotions in those who are watching or listening. Learning to apply the technique of emotional distance may help modify the quick reaction, which perhaps result from active mirror neurons, so that a person can continue tasks in an objective, efficient way.

**Emotional Distance: An Objective Approach**
Emotional distance allows one to set aside feelings temporarily and to be more objective about what needs to be done. Being more objective eases tasks of caregivers, especially doing personal care tasks such as at mealtime and during bathtime. Emotional distance helps the caregiver realize what actions or care tasks are important and which ones are not as important.

This approach should help a caregiver set priorities. It helps the caregiver to understand that some things have lost their importance to the care receiver and therefore are not really worth doing at this time. Wearing jewelry, fashionable outfits, a nice tie, or dress shoes, no matter what the occasion, now may not hold the value of before. Feeling comfortable may be more important than looking “smartly dressed”. No longer important, such less significant details are better left undone. They are not worth the extra caregiver energy that they demand.1
Emotional Distancing for Emotional Health
To avoid being emotionally overloaded and, as a consequence, suffering from extreme stress, fatigue, and burn-out, family caregivers must strive to remain emotionally healthy. Emotional health (some researchers have used the term, emotional competence) builds through experience, knowledge, managing time well, being able to address needs efficiently, keeping positive relationships, and using external resources to help with the caregiving. The skills of well-developed emotional distance help one keep in control of thoughts, feelings, and behaviors while providing care. This level of skill comes with years of experience and a healthy balanced life.

Emotional Balance

Key to emotional balance are three elements of emotional distance:

1. Emotional Shielding,
2. Emotional Processing, and
3. Emotional Postponing.

Emotional Shielding
Protect against overload of emotion.

Emotional Shielding refers to protecting oneself from being overloaded with emotion. Developing ways to maintain emotional control such as distancing the feelings and focusing on the goal of the task help in giving care.

Emotional Processing
Let it out. Talk about emotions soon after stress events occur.

Emotional Processing refers to the work that occurs after experiencing stress or completing a stressful task. Then the caregiver should take a break to “talk about it” with another person, perhaps a family member, the neighbor next door, or phone a close friend. The talk should involve expressing ones observations, thoughts and feelings related to the incident. It should include the feelings of the caregiver and care receiver that surfaced or were held in (not expressed) during the incident.

Emotional Postponing
Delay expressing emotion until a better time and place.

Talk about it later with a trusted friend or a trained professional helper.
Emotional Postponing refers to the delayed processing of the emotions. The emotions are kept inside oneself until an appropriate time when they can be shared with a family member, friend, counselor or other professional helper. Sometimes people never process the emotions. As a result, they gradually seem to become unfriendly or may act cold. The stored up emotions may burst out at inappropriate times such as at a social gathering. The emotions may burst out unexpectedly in hurtful ways, such as an explosion of anger while caregiving.

Emotional Health
Emotional health for caregivers involves keeping communication open with trusted family members, friends or professional helpers. Caregivers must schedule time for a healthy balance of communication and activities, time for relaxing (regular “down time” and respite) as well as times for physical exercise and social activities. They should use support services in the home and attend support groups for emotional support and education.

Important also to the emotional health of caregivers are receiving appreciation and recognition regarding their caregiving services and skills. Such comments should come from family members, friends, and others, for example the service providers, the family physician and other members of the health team.

Tips for Caregivers
It is important for persons receiving care to feel the respect of their caregivers. One approach to show such respect is for caregivers to try to have the maximum participation of the person receiving care and expressing value for that participation. For example, to show appreciation, the caregiver should make:

😊 positive remarks to them about their cooperation.

😊 positive remarks to them about allowing the care.

Such positive remarks will help the interactions necessary to the caregiving tasks flow in a positive way.

Balance of Emotional Distance with Emotional Closeness
Sometimes when a person has a memory disorder such as Alzheimer’s disease, their decline in memory, language, orientation, and judgment, are offset by their increased attention to the immediate “here and now”. They may have an increased sensitivity to the caregiver’s actions, facial expressions, tone and pace of words expressed, and mood. The care receiver may sense that the caregiver is different in some way. That disconnection of emotion may seed anxiety and a reaction of fear in the person receiving care.
Some people who feel too much emotional distance or emotional distance for too long may become demanding or irritable. They may translate the now emotionally distant caregiver as “cut off” and withdrawn or angry or even hostile. In such a situation they may act in unpleasant ways to gain attention and an open emotional response. They may become uncooperative or push away the caregiver to draw an obvious emotional response from the caregiver. It is often said that bad attention from a loved one is better than no attention or too little attention.

The caregiver should balance times of being emotionally distant with other times of emotionally open, expressive, and close so that the other person doesn’t feel emotionally isolated. A good time to release and open up positive emotions is when the caregiver and person receiving care are in a peaceful setting, relaxed and enjoying each other’s company.

After the caregiving tasks are done, the caregiver can relax and interact in a more emotionally connected way to the care receiver. For example, both people may relax, sitting close together, while listening to some music. Or, both people may have a glass of juice while on the back porch overlooking the garden and laughing about funny family stories.

**Challenges in Caregiving**

Providing direct care for someone puts a caregiver physically close to them and may awaken old memories especially when providing care over a long period of time. Events and feelings (positive as well as negative) that may have been ignored for years may begin to surface. Sometimes the feelings and memories that slowly emerge over time in a caregiving situation may grow very intense and may be difficult for anyone in the family to understand or manage. Physical exhaustion of the caregiver may add to the confusion of these feelings and memories.

Sometimes frustration mounts, especially as health and abilities continue to decline despite the best care efforts, and the caregiver may become more irritable. It is likely that the person receiving care will become aware of any negative emotional attitude of the caregiver and react. The reaction may take the form of being unwilling to cooperate or refusing to help with any details of the care, increased irritability, conflicts, irrational reactions, or anger outbursts.

Being briefly, emotionally detached while involved in caregiving tasks guards against being unaware of your own feelings and reactions during such struggles. When a caregiver lacks awareness of rising emotions, a caregiver may react with sharp words or anger rather than a preferred positive, calm, even toned response. Such a reaction will build tensions and increase the risks of unsafe behaviors. The caregiver or the person receiving care may strike or throw something at the other person.
An appropriate response to an uncooperative person receiving care should focus on reflecting that person’s feelings. The feelings may be frustration at being dependent or depression about the illness. An appropriate response should acknowledge the feelings that are communicated. The caregiver should not respond harshly to harsh words from the person receiving care. Another approach is to give a distracting response such as talking about another topic, or just ignoring the words and behavior of the person and talking about the current step of the caregiving task, how soon the task will be done and the next rewarding activity that will occur.

Repeating the same responses in a smooth, even tone of voice will help get a positive message across. Giving too many different or lengthy explanations probably will confuse and further distress the person receiving care.

**Stress from the Lack of Emotional Distance**
People who allow themselves to stay too connected emotionally and who do not take care of their own emotional needs may suffer from increased stress and develop problems. These problems may include trouble sleeping, increased irritability with the person receiving care and other loved ones, and closing down emotionally in other relationships.

As the stress increases, the risks for physical or emotional abuse or neglect increase. These unsafe behaviors may come from the caregiver and/or the person receiving care and/or other family members.

**Coping with Stress**
The large number of support groups through the efforts of the national Alzheimer’s Association (see their contact information and a few others at the end of this session) help caregivers cope with stress. The support groups throughout the U.S. as well as the large network of support and direct services for the person receiving care at home help a great deal. They contribute greatly toward helping family caregivers cope with the daily duties of the long-term care of someone with progressive dementia.

It is so important for family caregivers to reach out for help and to share-the-care. Working with someone rather than handling the job alone was key in a study of factors that helped family therapists with job-related stress. The study also found that relaxing activities and talking to someone who would provide support, were also very important. Similarly, in families which are dealing with Alzheimer’s disease or a related progressive memory disorder, having others help with the hands-on care is also key to helping family caregivers manage the long-term care. The following table lists other important helps.
Helps for Caregiver Coping

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<tbody>
<tr>
<td>1</td>
<td>Sharing the care with others.</td>
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<td>2</td>
<td>Talking with others (family, friends, support group)</td>
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<tr>
<td>3</td>
<td>Relaxing activities</td>
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<tr>
<td>4</td>
<td>Planning special activities alone or with others (fun to look forward to)</td>
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<tr>
<td>5</td>
<td>Leisure activities, including daily physical exercise</td>
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<tr>
<td>6</td>
<td>Regular time for oneself including alone time</td>
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<td>7</td>
<td>Spiritual activities</td>
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<tr>
<td>8</td>
<td>Healthy lifestyle: good diet, enough drinking water, no alcohol or tobacco abuses, etc.</td>
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Resources in Other People
Caregivers need support from others. Talking with someone else may provide suggestions about short-cuts and resources to help the family. Others can affirm that the caregiver is doing everything possible and providing the best possible care.

It is important for the caregiver to avoid having personal emotions run unchecked. These emotions may lead to unpredictable words being expressed while providing care. While it is important for the caregiver to be aware of such feelings and memories, it is important for the caregiver to manage these feelings and issues apart from the time of direct caregiving. Talking with friends, family members, a counselor, a psychologist, a clergy or other professional helper may be a way to deal with these feelings. Regular respite, doing other relaxing and enjoyable activities, reducing stress, and taking care of one’s own needs outside of the caregiver role also will help.

It is important to be open-minded about what is going on and to seek assistance. Others may provide support and a different, accurate perspective on feelings that are surfacing in the caregiver and how to address them. Sometimes people defend their feelings and reactions without understanding the basis of them. There may be strong beliefs that justify the reactions, feelings, and behaviors. Thinking critically and acknowledging feelings with the help of a supportive family member or a trained listener such as a clergy, social worker or counselor, can help to separate the feelings from behaviors. Such sessions help caregivers understand and respect their feelings. Then they can work on appropriate, positive approaches for the trying situations that arise while providing care.

A trained professional helper such as a clergy or counselor can help point out the important relevant facts and the behaviors that lead up to the outbursts or frustrations in the caregiver or care receiver. They may help the caregiver understand the impact of experiences from the past onto the present events and interactions. They can help the caregiver to figure out simple positive steps to identify the early points where feelings begin to stir up and help the caregiver apply the necessary emotional distance to ease the
progress of the caregiving tasks. Then after the tasks are completed, the caregiver may take some time for thinking about their feelings that they controlled so well. Caregiver should apply healthy strategies such as talking with someone to process their feelings in order to help them understand their feelings. Then they can move to the next step, figuring out how to honor the feelings. Then they can plan action steps to address personal needs, goals, and interests.

<table>
<thead>
<tr>
<th>Health Tips for Caregivers</th>
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<tr>
<td>1. Watch your own feelings and responses in order to be aware of your personal needs.</td>
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<tr>
<td>2. Honor your feelings: talk to trusted others about your feelings, frustrations and challenges in caregiving. Remember, there are no right or wrong feelings, just the wrong time and place for expressing them.</td>
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<tr>
<td>3. Take care of yourself.</td>
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<td>4. Schedule activities of interest with others (including pets) who are enjoyable.</td>
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<td>5. Get help with caregiving, household tasks, etc.</td>
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<tr>
<td>6. Have regular respite, start with 2 – 4 hours a week; increase the respite over time.</td>
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<td>7. Stay healthy.</td>
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Caregivers: Taking time to connect to personal feelings is important! Also important is taking time to think!

Practicing emotional distance allows some distance between yourself and your emotions for a short time and allows you to focus on the goal of completing the caregiving tasks at hand. Later, you should take time to reflect on your emotions and reactions that surfaced during the task.

As you review that moment when unpleasant feelings surfaced, you may think about what was occurring in the situation to bring those feelings up, how to deal with them in reasonable ways, and what resource people and programs can help you understand and deal with them.

As you think about developing strategies to address the issues and to take care of yourself, be mindful that you must hang in there and remain a caring caregiver over the full length of time that is needed, whether at home or in a care facility.
Summary

*Emotional distance* is a strategy that involves briefly separating personal feelings from the task at hand and the behaviors of the person receiving the care. It allows one to provide more objectivity in caregiving. *Emotional distance* is an important skill to help in caregiving. Keeping feelings controlled at the time of caregiving helps one to accomplish necessary tasks, especially with a person in declining health such as someone with Alzheimer’s disease. Family caregivers and other caregivers of people with Alzheimer’s disease and related disorders face daily demands that may be highly stressful. It is important for caregivers to set aside time later to share their controlled feelings with a trusted listener and to work on related issues that may arise.

*Emotional distance* is an important strategy for handling the challenges of daily caregiving tasks. Other coping strategies include social supports for the caregiver and care receiver, direct help with some of the caregiving and housekeeping tasks, respite for the primary caregiver, and counseling from a trained health professional.

**This ends the session on Emotional Distance.** Further information about caregiver support services is available through the resources listed in the following tables.

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<tr>
<th>National Resources</th>
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<tr>
<td>1. AlzOnline (866)260-2466 <a href="http://www.AlzOnline.net">www.AlzOnline.net</a></td>
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<tr>
<td>2. Alzheimer’s Association (800)272-3900 <a href="http://www.alz.org">www.alz.org</a></td>
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</table>
| 3. Administration on Aging (AOA), Washington, DC 20201  
  phone: (202)401-4541; fax (202)357-3560; website: [www.aoa.gov](http://www.aoa.gov) |
| 4. ElderLocator (800)677-1116 [www.eldercare.gov](http://www.eldercare.gov) |
| 5. National Family Caregivers Association [www.thefamilycaregiver.org](http://www.thefamilycaregiver.org) |
Florida Resources: Florida Department of Elder Affairs (DOEA)

1. Florida Elder Helpline (800)963-5337
2. Florida DOEA (850)414-2000

References


