Coping with Caregiving Stress by Walking in Nature

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Walking can be a valuable stress management tool.

I have written about the benefits of walking several times in this blog. Walking is a perfect form of exercise. Ten to 30 minutes of walking 3 to 5 times a week can make a significant difference in one's well-being.

Walking is also a great resource in coping with caregiving stress. I recently worked with a woman who was struggling with the burdens of caregiving. Having conducted research and written about this topic, I met with her a few times and we discussed "small steps" that could help.
Lise is a woman in her early eighties who cares for her husband who has dementia. She does not have an extended family and feels lonely and isolated. She has not exercised or socialized in several months. Lise spends her days taking care of Ari, her husband of more than 50 years. Ari has dementia. He is not completely disabled, but his loss of memory is stressful for Lise and the daily care she provides him, making his meals, reminding him to bathe and dress, driving him to the doctor, makes Lise so tired that she has not taken time to take care of herself. The burdens of caregiving have had an effect on Lise’s health and well-being.

The case of Lise and Ari is not unusual. Now that people are living longer, an increasing number of older men and women are developing dementia. Statistics indicate that Alzheimer’s is the 6th leading cause of death in the US. It is also an illness for which there is no prevention and no cure. Millions of people around the world are living with Alzheimer’s. Alzheimer’s disease, a progressive disease leading to gradual and complete deterioration. It affects social, affective, cognitive, and physical abilities. Alzheimer’s is also gendered; two-thirds of victims are women. In fact, a person develops Alzheimer’s every 69 seconds (Alzheimer’s Association, 2009). People live for years with Alzheimer’s, in fact, patients usually die from the disease 8 to 10 years after diagnosis.

During these years, the victims need constant care. Thirty to 38 million Americans, mostly women, are providing regular care for a loved one. The stressors associated with caregiving are overwhelming. Like Lise, many of these caregivers are over the age of 65 and struggling with their own health concerns. The majority of caregivers suffer from anxiety and more than 30 percent suffer from depression (APA, 2007).

Every day millions of women and men struggle to help a loved one live their later years with a degree of comfort and dignity (Tahmaseb McConatha, McConatha, & Stricker, 2019). Like many other people who care for a family member or friend, the stresses of providing 24-hour care have threatened Lise’s health and happiness. In the past two years, she has gained almost 20 pounds. She does not exercise and she eats to comfort herself. She knows she should eat less, eat better, and exercise more, but she is too tired most of the time. When she is tired and stressed she eats; food has always provided her with comfort. When she was active this was not a problem. She does not binge or eat overly large amounts of food and she simply enjoys eating.
Lise’s early childhood was spent in WWII in Europe. She was often hungry. As a result, she associates food with safety and comfort. Until now she has never been heavy or had any weight-related health problems so eating when she wanted a degree of comfort was not a problem. Now, in later life, as she cares for her husband 24 hours a day, she eats too much, too often, and mindlessly. As a result, she has become heavy which has resulted in less energy and threats to her health. On a recent check-up, her blood work indicated that she has developed borderline diabetes. Lise is not alone in seeking comfort in food. The saying “comfort food” is a good example that most people associate food with home and family and “comfort”. Problems arise when one eats the wrong kind of foods for comfort, or too much food, it is important to find comfort in a variety of ways, not just by eating.

Lise does not like her aging body and her health is at risk. After several conversations with Lise, she decides to take action now before her health deteriorates further. Her neighbor walks every day in a large park in their community. She has often asked Lise to join her, telling Lise that once she starts she will be addicted. Before she can change her mind, Lise walks next door and asks Sonja if she can walk with her the next morning. In the afternoon Lise goes out and buys a pair of walking shoes.

Her doctor has told her that walking would be good for her, so she knows there is no medical reason she should not walk. Her doctor has also said that Ari should walk as much as he can. Lise is determined that in the afternoons she will encourage Ari to take short walks around the block. Lise figures that even a short walk would help Ari feel better. A sedentary lifestyle can have significant negative health consequences, even for people with Alzheimer’s (APA, 2009). In one study, three young, healthy men were put on bed rest for just 3 weeks. At the end of this only three weeks, their physical health had already declined, with an increase in body fat, a decrease in muscle strength and higher heart rates and blood pressure (Harvard Health Publications, 2011).

The implications of this small study are tremendous. Given that chronic illnesses increase in later life, it is highly likely that many older adults will be bedridden for a time. One way to reduce the likelihood of this happening is to walk, walk slowly if that is all you can do, walk for short periods at a time if that is necessary, but walk. Walking like other physical activity boosts the immune system reducing the chances of developing acute or chronic illnesses. In one study reported in Live Science, people who exercised at least five times a week were less likely to catch a cold and if they did their cold symptoms
lasted for a shorter period of time than those who did not exercise (Health and Science, 2010). There is substantial evidence that physical activity is positively related to overall wellbeing and makes people feel happier and more relaxed (Rennemark, Lindwall, Halling, & Berglund, 2009).

Lise has even read an article in the newspaper which stated walking may help ward off Alzheimer’s (Tanner, 2004). As Lise begins joining her neighbor Sonja for a morning walk she immediately feels somewhat better. Sonja is very happy to have company. Lise starts small, walking only 15 minutes the first day. She likes it so much that, very soon, Sonja and Lise begin to walk together for one hour 4 to 5 times a week.

In three months of walking Lise loses 12 pounds. She and Sonja have also become good friends; they also have lunch one day a week at a local cafe. By walking, Lise has also met several other neighbors, including Susan who also cares for her husband. Susan also attends a support group for caregivers. The group provides her with information on what to expect as the disease progresses, and methods of stress reduction and management skills (Dartnell, Tahmaseb-McConatha, Kumar, & Treadwell, 2017). The support group is a source of hope for Lise. Lise decides to try to attend the group sessions with Susan. Lise finds that sharing stories of care with her new friends and the group to be helpful. Occasionally, in the afternoons the two caregivers have managed to encourage their husbands to take a stroll in the park and then get together for a short visit. Lise feels much better physically than she did three months ago. She is also much happier. While walking certainly does help alleviate the majority of her problems -- in order to cope effectively with the stress related to caregiving fully and considerable formal and informal support is needed -- walking has been a great first step for Lise.

References


