

HELPING RELATIVES AND CARERS OF STROKE SURVIVORS OVERCOME DEPRESSION PROGRAMME



CEDArS

For Carers of Stroke Survivors

Problem Solving

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PART 1: WHAT IS PROBLEM SOLVING?

Problem solving is an evidence based treatment for low mood or depression. A lot of research has found it to be effective, especially for people who are experiencing stressful life events and difficulties, such as those that can be experienced as a carer of a stroke survivor.

Problem solving helps you to deal with problems you experience in life effectively. These may be significant life events or the day-to-day problems you may encounter.

But what is a problem?

A **problem** is a situation, task or activity that needs to be sorted out, however it is sometimes difficult to recognise an effective way to do this. There may be barriers getting in the way of being able to sort the problem or you are faced with lots of new tasks and activities that are part of the caring role. Here are a few common problems suggested to us by people caring for someone with stroke:

- The situation or task is a new one, such as caring for someone with a stroke, or taking on things the stroke survivor used to do, such as cooking or DIY.
- Competing demands, such as not having time to do activities for you and also care for someone with a stroke.
- Financial restrictions now you are carer.

If a problem is difficult to solve this can be stressful and impact on how you are feeling emotionally.

A **solution** is the way you cope with the problem. If a solution is successful this will have a positive effect on how you feel.



When we experience a major life event it often means other difficult life events or problems arise. For example, a loved one experiencing a stroke or becoming a carer is a major life event. Carers we have worked with have spoken to us about a number of other difficulties that may then be experienced:

- Financial difficulties
- Leaving work or education
- Giving up plans for the future or retirement
- Feeling alone
- Own health problems
- Relationship difficulties

This can make you feel like your problems are increasing which is understandably overwhelming, distressing and can make things seem very difficult to manage. Stressful major life events and day to day problems can cause you to experience emotional difficulties such as low mood, depression or stress. If you then experience difficulties with coping with these problems you will experience increased emotional difficulties and distress.

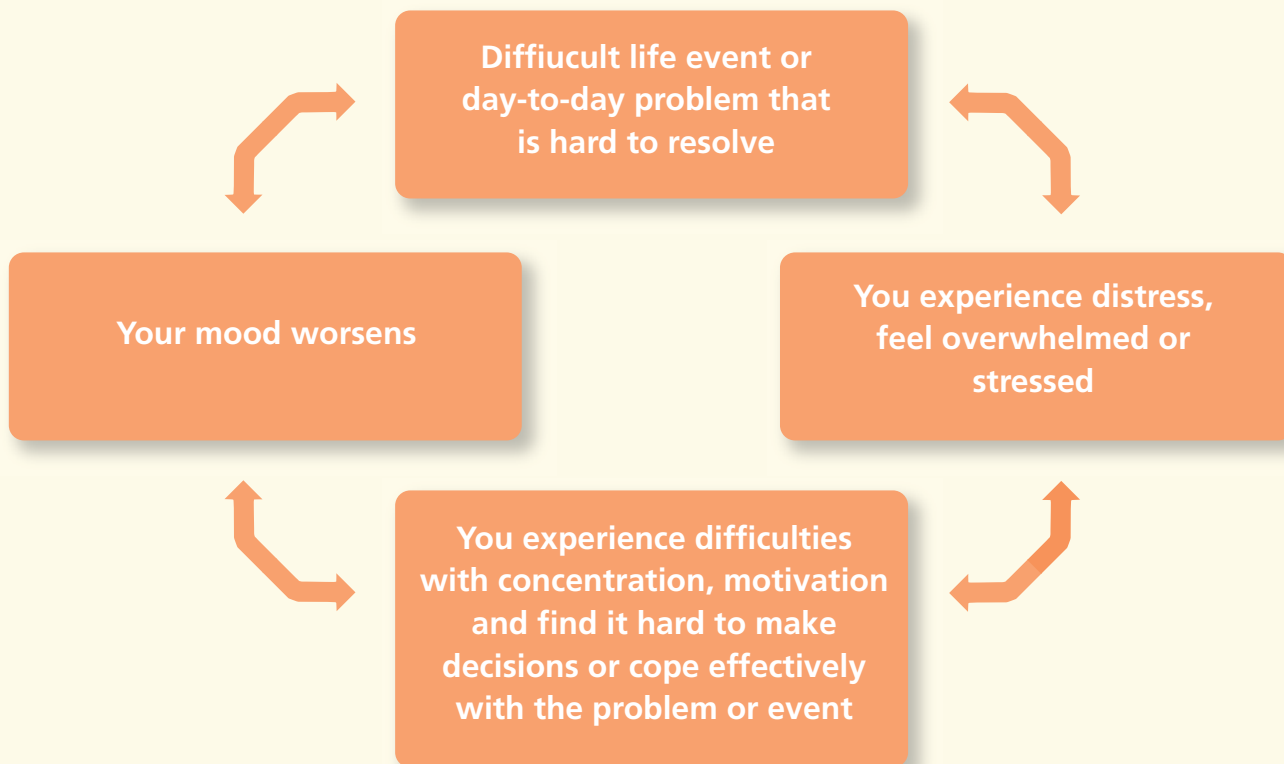
PART 2: HOW DOES PROBLEM SOLVING WORK?

Difficult life events and day-to-day problems can impact how you feel emotionally. Difficulties managing these can end up resulting in you feeling low or depressed.

The symptoms of low mood or depression can also impact upon your ability to effectively solve these problems, like the 'vicious cycle' or 'downward spiral' mentioned in the 'Introduction' Booklet'.

Therefore both your depression and role as a carer may be impacting on your ability to solve the problems you may currently be experiencing. This can be seen in the diagram on the following page.

The Cycle of Difficulties Problem Solving and Low Mood



With problem solving you can break this vicious cycle by looking at more effective ways of coping with problems in your life. This will put the cycle in reverse and things will start to improve.

You may already feel like you have too many overwhelming problems to solve, or there are no solutions to your problems. This is normal and to be expected, especially as a busy carer of a stroke survivor. However, problem solving helps you identify problems that are important to you and find practical solutions.

Problem solving can also help you to distance yourself from problems that are not important and make things feel less overwhelming.

Your PWP is there to help you too if you find yourself struggling with any of the techniques in this booklet.

PART 3: GETTING STARTED

Step 1: What is really important to me in my life?

The first step is to think about what things in life are really important to you. This can help you prioritise which problems to focus on solving and can make things feel less overwhelming.

It is likely there will be many things of importance to you in your life. Carers we have worked with commonly identified things such as:

**Caring for your
loved one**

**Your children or
grandchildren**

Your Partner

Cooking nice meals

Seeing friends

Happiness

Although you may have many things that are important to you, first of all try and think about five or so things that are really important to you right now. This will help you chose which problems to focus on first of all. You can always come back to other things that are important in your life later.

Remember to write down what is important to you, rather than the things you feel you 'should' write down. Use 'Worksheet A: What is really important to me in my life' to record the things you have identified.

Worksheet A: What is really important to me in my life?



List the five most important things in your life right now below:

1	
2	
3	
4	
5	

Helpful Hint: Sometimes people find it helpful to think about the following areas in their life:

- Relationships
- Roles and responsibilities
- Social and leisure activities
- Health
- Finances
- Religious or spiritual life

Step 2: What are my problems?

The next step is to think about your current problems or things you find yourself worrying about, and write them down in 'Worksheet B: My problems'. It is important to think about the types of things that can make you feel low or depressed no matter how small they might seem.





Worksheet B: My problems



1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	



Step 3: Types of problems, difficulties or worries



Next have a think about what types of problems you are currently experiencing or worrying about.

There are 3 different types of problems:

Not important

These are problems that make you worry but they don't have anything to do with the things in life that are important to you. E.g., 'I was late getting my partner to stroke club' or 'I forgot the bread on my shopping list'. However, you may have problems not related to the things in life you find important but this doesn't necessarily mean they should be classed as unimportant. You can use the list of important things in your life as a guide but make your own judgement about what problems you consider important.

Important and can be solved

These are problems of importance and are relevant to your life that you need to actively work towards solving. Later in the booklet we will talk through ways to help solve these problems or worries. E.g., 'arguing with the person I care for' or 'I don't have many friends anymore who are not carers' or 'What if I forget my partner's medication.'.

Important but cannot be solved

These are problems that have no way of being solved but they are still important to you. Sometimes these are life events or things that cannot be changed. For example, you cannot change that your partner has had a stroke. E.g., 'my partner has had a stroke' or 'I am now a full time carer and can't work again'.

Also you may find yourself worrying about things that might happen in the future. For example, 'What if the person I care for has a fall' or 'What if the taxi doesn't turn up to take my partner to stroke club.' These are known as 'hypothetical worries' and although you might dwell on these problems a lot there is no way of solving them.

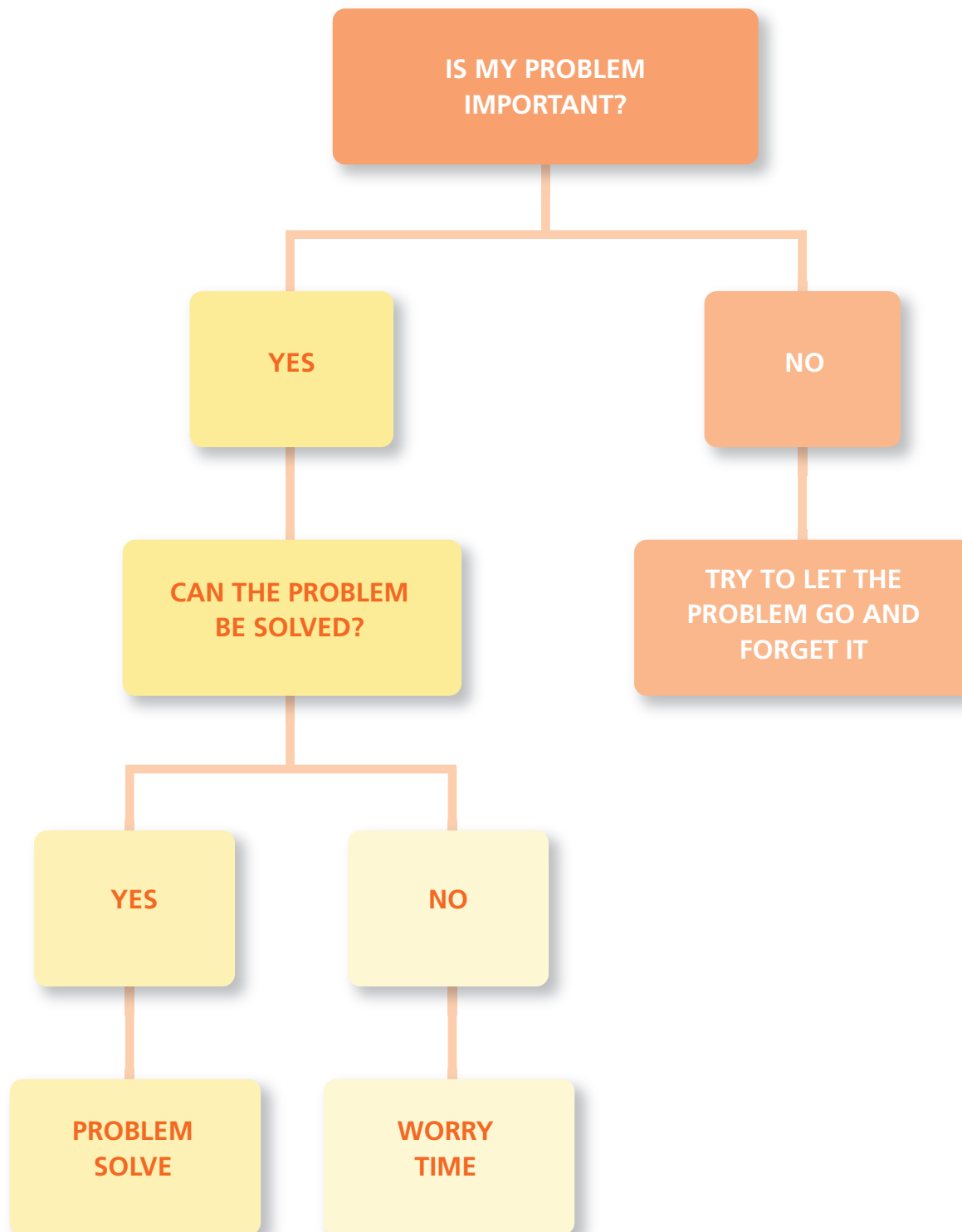
Look through each of the problems or difficulties you have identified on 'Worksheet B: My problems' and transfer them into 'Worksheet C: The types of problems I am experiencing.'

Worksheet C: The types of problems I am experiencing

Not important	Important and can be solved	Important but cannot be solved
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-----	-----	-----

Is my problem important?

After deciding what types of problems you are currently experiencing follow the diagram below to decide how to best deal with these problems



Next steps

'Try to let the problem go'

Although it can be very difficult to do it is important to try not to worry about problems that are not important. If you find yourself having difficulties with worrying about the problems you have categorised as not important you may want to go to 'Step 4: Problem Solving' if they have a practical solution, or 'Step 5: Worry Time' if they are problems or worries that can't be solved.

'Problem Solving'

If a problem is important and can be solved go to 'Step 4: Problem Solving' on page 12 to start to work towards overcoming these problems.

'Worry Time'

If a problem is important but cannot be solved go to 'Step 5: Worry Time' on page 19 that can help you let go of these problems and worries.



Step 4: Problem solving

Next we will look at ways to tackle the problems that are important to you and solvable.

Most of the problems we experience are solvable. When you are feeling low or depressed, or overwhelmed by the responsibilities of the caring role, it can seem like problems are too difficult to solve. However, there are seven stages that can be followed to help you to work towards practical solutions to your problems.

Stage 1a: Identify the Problem

The first stage is to pick a problem to work towards from your list of problems that can be solved that you identified in 'Worksheet C: The types of problems I am experiencing.'

It is important that the problem you decide to work on is as clear and precise as possible. For example 'problems with the person I care for' is not very precise or clear. A clearer problem may be 'communication difficulties with the person I am caring for due to their aphasia'. However, the problem cannot be too specific, for example 'I had an argument with the person I care for this morning because I didn't understand what they wanted' as this problem is too small to be solved.

Stage 1b: Converting Worries into Problems

You may have written down a number of worries on your list that have practical solutions. It is important to convert these worries into practical problems that you can work towards solving. For example, 'I am worried I am going to forget when to give my wife her medication' could be converted into 'I find it difficult to remember when to give my wife her medication'.

Or 'we're meant to be going out to dinner on Saturday with friends, what if there are problems getting in the restaurant with a wheelchair?' could be converted into 'I don't know if the restaurant we want to go to on Saturday is wheelchair friendly'. Sometimes converting worries into practical problems can be tricky. If you find yourself having difficulties your PWP will be able to help you.

Once you have identified the problem you would like to solve write it down on 'Worksheet D: Problem Solving Record'.

Stage 2: Identify the Solution

Try to identify as many potential solutions as possible. Don't worry if the solution seems ridiculous— at this stage nothing should be rejected.

Stage 3: Analyse Strengths and Weaknesses

Next think about the strengths and weakness of each of the potential solutions you have identified to allow you to think about the main advantages and disadvantages of each solution. You can use 'Worksheet E: Strengths and Weaknesses Analysis' to write these down.

Try to think about the following:

- Is the solution likely to work?
- Are you going to be able to try out the solution?
- Do you have everything you need to try out the solution?

In the final column put a 'yes' for any solutions you would like to try out, a 'maybe' for those you may want to think about more later and 'no' to those solutions you feel you can currently reject.

Stage 4: Select a Solution

On the basis of the strengths and weaknesses analysis of the potential solutions pick a solution you would like to try out. When selecting a solution think carefully about whether you have the resources to try out the solution as if you don't have the necessary resources it will only lead to failure.

Stage 5: Planning Trying out the Solution

Try to think about the steps you need to follow to try out your solution. Some solutions may require careful planning and a number of steps to be achievable. It is important to think about these carefully to increase the likelihood of the solution working. You may want to think about what resources you need to carry out the solution, for example, time, support, financial, equipment etc. Try to think about the steps that you will need to follow in a logical and linked way. It is also really important to write a specific plan. Using the 'Four Ws' – 'what', 'where', 'when' and 'with whom', will help with this. Write down your plan in 'Worksheet D: Problem Solving Record.'

Stage 6: Trying out the Solution

Next you need to put your plan into action! It is really important to write down what you did and how it went. You can use 'Worksheet F: How Trying out my Solution Went' to record this. Try and write down exactly what you did as this can help you highlight things that went well, or things that didn't go so well that you might want to do differently next time.

Stage 7: Review

Now use 'Worksheet F: How Trying out my Solution Went' to review how well your solution worked. Some solutions may have worked, some may have worked a little or some may not have worked at all. Don't worry if your plan didn't work this time. Some problems are very difficult and complex and may need more than one plan to solve. If the solution has worked you may want to think about generating new ones, based on what you learnt here, to apply to other problems. If it did not work, then perhaps go back to Step 4 and consider a new solution to try.



Worksheet D: Problem Solving Record

Stage 1: Identify a Problem

What is the problem I would like to try and solve?

Stage 2: Identify Potential Solutions

What are the potential solutions?

Stage 3: Strengths and Weaknesses Analysis

Use Worksheet E to write these down for each solution considered





Stage 4: Solution Section

What solution am I going to try out?

Stage 5: Planning Trying out the Solution

What steps will I follow to apply my solution?

E.g., What, when, with whom, where? What resources do I need?

What logical steps do I need to follow?

Stage 6: Trying out the Solution

Use Worksheet F to keep a diary of what you did

Stage 7: How did it go?

Use Worksheet F to review how well your solution worked





Worksheet E: Strengths and Weaknesses Analysis

My Problem Write the problem here:

What are the strengths and weakness of each solution? Write these below:

Solution	Strengths
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>





Weaknesses

Choice (yes/no/maybe)

Weaknesses	Choice (yes/no/maybe)
<p>.....</p> <p>.....</p> <p>.....</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>.....</p> <p>.....</p> <p>.....</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>.....</p> <p>.....</p> <p>.....</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>.....</p> <p>.....</p> <p>.....</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>.....</p> <p>.....</p> <p>.....</p>	<p>.....</p> <p>.....</p> <p>.....</p>





Worksheet F: How Trying out my Solution Went



Stage 6: Trying out the Solution

What exactly did I do?

Stage 7: How Did it Go?

How did it go? What went well? What didn't go to plan?



Step 5: Worry time

Even when problems are not solvable it can be really difficult not to worry about them. Worry is something that we all experience on a day-to-day basis however sometimes worrying about things can become a problem and can get in the way of us doing other things.

Sometimes you may worry about a problem that has a practical solution. If you find yourself worrying about a problem that something can be done about it is important to use the 7 stages of problem solving discussed earlier in order to work through problems that are important and solvable.

However, you may find yourself worrying about problems that can't be solved, for example, a hypothetical worry about the future such as 'my partner may have another stroke' or 'what if the person I care for falls whilst I pop up to the shop'.

Although it is important to try and 'let go' of worries that have no practical solution, this is much easier said than done. One solution that some carers told us they find helpful is to schedule something called 'Worry Time'. This allows you to plan time to worry about problems but at a specific time so these worries don't take over your life. You can try following these three steps to help you with these worries:

Step 1: Schedule Worry Time

Think about a period of time each day that you can allow yourself to worry. 20 – 30 minutes should be enough. When you schedule your worry time is completely up to you. Having scheduled worry time can help stop your worries from impacting you during the rest of the day as you know you have this piece of time where you can worry. It is important that you are not disturbed during worry time as far as possible. You might want to let others know not to disturb you, turn your phone on silent and find somewhere quiet for example.

Step 2: Writing your Worries Down

Scheduling worry time won't stop worries from popping into your head during the day. However, as they do write these worries down and set them aside until your scheduled worry time. You can use the 'Worksheet G: Worry Time' on the next page to do this. This can help reduce the impact of the worry as you know you can go back to these worries during your scheduled worry time.

Once you have written the worry down try to focus again on the present. Sometimes it may help to do something different to what you were doing before. Remember you have set aside time later to worry and try to let the worry go for now.



Worksheet G: Worry Time

My scheduled worry time is at:

My Worries

1

2

3

4

5



Step 3: Your Worry Time

When it is your scheduled worry time read through the worries that you have written down during the day. You can use this time to worry about these problems. Sometimes you might find they are no longer a worry for you now it is later in the day. If this is the case put a line through the worry. If the worries you have written down do have a practical solution then go back to the 7 stages of problem solving discussed earlier in order to work through 'Problems that are important and solvable'. Using worry time effectively does take time and practice. However, over time you may find this a useful technique to reduce the impact your worries are having on you on a day-to-day basis.

Next Steps

As you work towards your problems remember to review your list of problems on a regular basis. You should be able to start to tick off unimportant problems that no longer bother you and the important and solvable problems you are starting to work towards. Problems that cannot be solved may stay on the list for longer, but cross these off when you find they no longer bother you as much too.

As you work through your main problems and difficulties you should find yourself having more time to work towards things that are really important in your life – the things you identified in 'Worksheet A: What is really important to me in my life?'

A number of the problems and difficulties you have already started to work on will likely be around these important areas of your life but as you work through solving these problems you should find yourself having more time to concentrate on more areas of life that are important to you.

PART 5: COMMON DIFFICULTIES WITH PROBLEM SOLVING

I am having problems letting go of life events that can't be changed. Sometimes we may find our problems are things that have happened that cannot be changed, for example 'my partner had a stroke' or 'I've had to give up my career'.

The way in which we cope with important events and losses that cannot be changed is very individual. Some people find talking to someone they trust helpful. Others find talking to people who have experienced a similar event helpful.

When coping with such events it is likely that you will experience difficult emotions such as low mood, depression, anger or worry. These emotions are completely normal and to be expected. It is important to accept these difficult emotions as they are part of the acceptance process we go through when experiencing difficult life changing situations or losses.

However, if you identify that accepting these life events or losses is your main difficulty it is important you speak with your PWP as you may need a different type of support.



The problem I am working on seems too big

You may have identified problems that seem too big or overwhelming to solve. This is very normal and to be expected, especially if they are problems you have been looking to solve for some time.

One way of helping with problems that seem too big or overwhelming is to look at breaking them down.

For example, you may have identified that a problem such as 'the house is a mess' and you don't have the time or energy to keep up with the housework. Cleaning the house is actually made up of lots of smaller activities that may be more achievable in the short term. For example, you could break this down into cleaning specific rooms, or performing specific tasks such as hovering or changing the bedding.

Other problems might be very complex, for example difficulties paying the mortgage. When breaking down a difficulty with finance you may want to think about the different components such as how much debt you have, what your income is now you are a carer and what your expenditure is.

If you find yourself struggling with breaking your problems down speak to your PWP who will be able to help.



PART 6: TOM'S RECOVERY STORY

I am 72 years old and my wife Mary had her stroke 2 years ago. Mary suffers from aphasia and also has memory difficulties. When she had her stroke it was like her whole personality had changed, she would get really angry and lose her temper a lot and I found it really difficult to manage. We also had a lot of difficulties communicating with one another which we found frustrating and it put a huge strain on our relationship. I stopped our friends coming over as they didn't really know how to deal with Mary's communication difficulties and never took up offers of support from my grandchildren as I worried they wouldn't be able to understand what she needed, or she might get angry with them. Over time I ended up having to stop doing lots of things I used to enjoy, like playing bowls or watching the local football team play and felt more and more alone. I had to take on a lot of responsibilities around the house too that were totally new to me, like the housework and cooking that I found really tough.

One day when dropping Mary off at the stroke club I broke down to one of the carers. He told me he had experienced similar difficulties and seen someone at his local GP practice that had helped him. I was really unsure. I couldn't see how speaking with someone could help with all my problems. However I decided to speak with my GP and two weeks later I had an appointment with my PWP Charlotte. Charlotte asked me a lot of questions about the things going through my head, how I felt in my body and what things I was doing more or less of. We also spent a lot of time talking about how I was managing becoming a carer and the impact being a carer had on my life. Charlotte explained the vicious cycle of depression to me, and it made sense that what I did, what I was thinking and how I felt physically all impacted on one another and made things worse. We also spent some time talking about how when we experience difficult life events like becoming a carer we may experience lots of other new problems and difficulties that can feel impossible to tackle. Charlotte said that low mood can also make our ability to work on difficulties and problems harder, for example feeling tired and having little energy. Charlotte gave me the 'Introduction Booklet' to read so I could go away and decide on which treatment I wanted to work with.

I met with Charlotte the following week and told her that I liked the look of problem solving. It seemed like a practical solution and I could identify with having a lot of problems I felt I couldn't solve.

I started with thinking about the things that were important and of value to me. I found this quite easy and realised that most of the important things were around my relationship with Mary, grandchildren and friends and I noted these down on 'Worksheet A: What is really important to me in my life?'



Worksheet A: What is really important to me in Tom's life?

List the five most important things in your life right now below:

1	<i>My relationship with my wife Mary</i>
2	<i>My relationship with my grandchildren</i>
3	<i>My relationship with my friends</i>
4	<i>Playing bowls</i>
5	<i>Being a good husband and carer for Mary</i>

Next I wrote down all the problems I was currently experiencing into 'Worksheet B: My problems'. Once I got started I realised just how many things there were and it all seemed a bit too much.



Worksheet B: My problems

1	Communicating with Mary
2	I forgot to pick up milk and bread last week and had to go out again
3	Losing my patience with Mary
4	Not being able to play bowls
5	Not seeing my friends at football matches
6	My friends not understanding Mary's difficulties
7	What about if I can't cope and Mary is taken away from me?
8	Not having any time to myself
9	Accepting my grandchildren's offers to help with Mary
10	I am afraid Mary might have another stroke
11	My wife has gone now she has had a stroke
12	I was late getting Mary to stroke club

Charlotte described the three types of problems that we experience: those that were not important; those that were important and could be solved and those that were important but couldn't be solved. Charlotte explained it was important to identify problems that have practical solutions so we could start to work on those difficulties. She explained that sometimes the problems we experience aren't actually that important and that we should try not to worry about these difficulties and focus on those that are important to us. We also spoke about problems that were important but couldn't be solved. Sometimes these are life events that couldn't be changed but I needed to try to come to terms with, however difficult that would be. She also described how we sometimes worry about hypothetical problems, like things that might happen but we can't control. I recognised that I had worries like this, such as 'what if Mary has another stroke'. Charlotte said that we could use something called 'Worry Time' if I found myself having difficulties letting go of these worries.

I then spent some time in the session moving my problems into 'Worksheet C: The types of problems I am experiencing'. I noticed that most of my problems were solvable and many of them were around my relationship with my wife, my grandchildren and friends.



Worksheet C: The types of problems Tom is experiencing

Not important	Important and can be solved	Important but cannot be solved
<p>I forgot the milk when I went to the corner shop and had to go out again</p>	<p>Communicating with Mary</p> <p>Losing my patience with Mary</p>	<p>What about if I can't cope and Mary is taken away from me?</p>
<p>I was late getting Mary to stroke club</p>	<p>Accepting my grandchildren's offer to help look after Mary</p>	<p>What if Mary has another stroke</p>
	<p>Not being able to play bowls</p>	<p>My wife has gone now she has had a stroke</p>
	<p>Not seeing my friends at football matches</p>	
	<p>My friends not understanding Mary's difficulties</p> <p>Not having any time to myself</p>	

I then selected a problem I thought I would like to work on from my 'Important but Solvable' list and to write the problem into Stage 1 on 'Worksheet D: Problem Solving Record.'

Initially I wrote down 'Communicating with Mary' as the problem I wanted to work on. But Charlotte pointed out it was important to make sure the problems I work on are as specific as possible. I tried to make the problem more specific but found this really tough. Charlotte helped me by asking me to think carefully about what problems I experienced communicating with Mary, how I wanted to communicate with her and what I wanted as a result. This really helped me think about how I wanted to word the problem and I came up with: 'I find it difficult to communicate with Mary because of her aphasia and we argue and get frustrated with one another'. This was a problem that impacted on myself and Mary and I knew the problems we were having in our relationship were due to us not knowing how to communicate with one another. I felt that this was a really important problem to solve and would have a really big impact on my mood.

I then wrote down all the solutions I could think of to help solve the problem. I found this really difficult but Charlotte told me that at this stage it was important to think about all solutions, even if they seemed silly. After I had managed to come up with a few potential solutions I moved onto Stage 3 and thought about the strengths and weakness for each of the solutions I had identified and wrote these down 'Worksheet E: Strengths and Weaknesses Analysis.'

Charlotte and I started to write these down in the session and I was encouraged to carry on doing this as homework. Charlotte emphasised that if I wanted to I could move onto selecting a solution, planning the solution and trying it out if I felt comfortable doing this before we next met.

Whilst at home I carried on writing down the strengths and weaknesses for each solution. Looking through the strengths and weaknesses I had identified it was clear there were two solutions that looked particularly good: 'speak to the Connect to get some advice about how to communicate with someone with aphasia' and 'speak to some of the carers at the stroke club to get some tips about how they communicate with the person they care for'. Both seemed like really good ideas but I decided to speak with Connect first of all. I remembered reading about them in the 'Introduction Booklet' and it seemed they might be able to provide some really good advice that might be more specific to Mary's difficulties. I wrote down the solution I decided to try out in Stage 4 in 'Worksheet D: Problem Solving Record.'

Next I thought about what steps I would need to follow to try out the solution. Charlotte had explained to me in the last session that I should try to be specific about my plan and the steps I would need to follow, and that it was important to think about the four Ws: What, When, With Whom and where. I realised I would need to call when I had some spare time. Mary often had a nap in the afternoon at about 3pm so I decided that would be a good time to call. I was also a bit worried about asking the wrong questions. So I decided to write down everything I thought they would want to know about Mary's difficulties and also exactly what I wanted to find out so I would hopefully not forget anything important. Breaking down the solution into these different steps was really helpful and calling them didn't seem so overwhelming.

Next I put my plan into action and recorded how it went in 'Worksheet F: How Trying out my Solution Went.' The following week I had my next appointment with Charlotte. It was great telling Charlotte how I had got on. Connect were really helpful and provided me with lots of advice about how to communicate better with Mary. I didn't realise things like having background noise like the TV would be really difficult for Mary.

They also sent me a really good information pack that was helpful for both Mary and I to look through together. In my appointment with Charlotte we spoke about what problem I would start to work through next. I decided that getting the information pack on aphasia might be helpful with some of the other problems I was experiencing. One of my problems was that our friends didn't really understand Mary's difficulties or how to communicate with her. I was also worried about letting our grandchildren help out. I realised that one of my worries was around them not being able to cope with Mary's communication difficulties. However I realised that sharing the information pack with my friends and grandchildren might help with this.

Over the next few weeks things really started to improve. Once I felt comfortable having the grandchildren over and leaving them with Mary I was able to find time to play bowls and I have even managed to see Rutterbridge Rovers with Stan a couple of times at the weekend, blimey I thought I had problems!! Although I still have difficulties being a carer they feel a lot less overwhelming now. It is really useful to have a structured way of breaking my problems down and finding practical solutions to them.





Worksheet D: Tom's Problem Solving Record

Stage 1: Identify a Problem

What is the problem you would like to try and solve?

I find it difficult to communicate with Mary because of her aphasia and we argue and get frustrated with one another'

Stage 2: Identify Potential Solutions

What are the potential solutions?

Leave the room when we have an argument

Use a dictionary

Look for tips online

Speak to Connect to get some advice about how to communicate with someone with aphasia

Speak to some of the carers at the stroke club to get some tips about how they communicate with the person they care for

Stage 3: Strengths and Weaknesses Analysis

Use Worksheet E to write these down for each solution considered



**Stage 4: Solution Section**

What solution am I going to try out?

Speak to Connect to get some advice about how to communicate with someone with aphasia

Stage 5: Planning Trying out the Solution

What steps will I follow to apply my solution?

E.g., What, when, with whom, where? What resources do I need?

What logical steps do I need to follow?

Go through Mary's medical notes and make sure I write down everything

Connect might want to know.

Write down the specific difficulties I experience communicating with Mary to see if they can provide me with specific advice around these problems.

Call Connect on Thursday afternoon at around 3pm when Mary is taking her nap.

Stage 6: Trying out the Solution

Use Worksheet F to keep a diary of what you did

Stage 7: How did it go?

Use Worksheet F to review how well your solution worked



Worksheet E: Tom's Strengths and Weaknesses Analysis

My Problem Write the problem here:

I find it difficult to communicate with Mary because of her aphasia and we argue and get

What are the strengths and weakness of each solution? Write these below:

Solution	Strengths
Leave the room when we have an argument	It gives me a chance to cool down
Use a dictionary	Might help Mary to find what she wants to say to me
Use the internet to look for tips	Should be able to get lots of ideas to try out
Speak to the Charity Connect to get some advice about how to communicate with someone with aphasia	I should be able to get some specific advice to Mary's difficulties. They are a national charity and specialise in aphasia so they are a trusted source
Speak to some of the carers at the stroke club to get some tips about how they communicate with the person they care for	Quite a few people at the stroke club have aphasia so some of the carers will likely have some really good tips. It will make me feel less isolated if I can share my problems with people who understand



frustrated with one another

Weaknesses

Choice (Yes/ No/ Maybe)

It isn't really going to solve the problem. We will still have arguments which I find distressing

No

Sounds really time consuming and might make us both more frustrated

No

I don't really like searching for tips online because there are so many and I never know where to start or which tips would be best with Mary's problems

Maybe

Need to find the time to call them. I am not sure what questions to ask, what if I ask the wrong thing and sound stupid.

Yes

The stroke survivors may have different problems to Mary so the tips might not work for her. I don't want the carers to think I can't cope. I don't normally speak to the carers at stroke club so I feel a bit uncomfortable asking for their advice

Yes



Worksheet F: How Trying out Tom's Solution Went

Stage 6: Trying out the Solution

What exactly did I do?

I noted down all of Mary's difficulties when Mary had her afternoon nap on Monday so I was prepared if Connect asked me any questions. I thought about all the communication problems Mary and I had so I could ask about specific advice around dealing with these difficulties. Some of these came to me straight away but I also spent a couple of days jotting down difficulties when they arose to help ensure I didn't leave anything out.

On Thursday afternoon when Mary was having her nap and I made sure I had all the information I needed and a pen and paper and called Connect to speak with one of their advisers.

Stage 7: How Did it Go?

How did it go? What went well? What didn't go to plan?

I think it went really well. Connect spent a long time on the phone with me and gave me some great information. I felt much more comfortable calling them knowing that I had all the questions I wanted to ask written down. It was good to identify a time when Mary would be asleep so I wouldn't be disturbed whilst on the phone. Connect have also sent me an information pack which I was able to share with Mary. I am also going to use the problem solving technique to speak with our friends about Mary's communication difficulties so they can start to come around again. I think it would be helpful to share this information with my grandchildren and then I might feel more comfortable taking them up on their offers to help out with Mary so I can get a break.



CEDARS LIVING EXPERIENCE GROUP

As well as interviewing a number of carers and relatives of stroke survivors the treatment booklets were also developed closely with the three members of the CEDArS Lived Experience Group.

A little about Celia

I am the sole carer for my partner who had a stroke 2 years ago at the age of 59. By the time he was correctly diagnosed with a stroke (2 weeks later) he had suffered more than one and consequently has damage in different areas. His main problems are weakness down the right hand side and extensive neurological damage. The latter took some time and a lot of research to ascertain exactly what the problems were. Initially it was a huge shock to both of us, but I bore the brunt of it as he seemed immune from worries of the present or the future.

I obtained an MA in Social Care quite late in life, after getting a degree in Politics at 42. I immersed myself in working as a frontline Social Worker with Care Leavers, aged 16-21 and helped develop the team, as the legislation for committing to this age group was new. I also helped write some of Exeter City Councils' policy on Homelessness. When my partner had his stroke I changed to part time work so that I could be his carer but found it hard to fully commit to either task. I left work after 15 months and made his rehabilitation my goal. Initially I channelled myself into basic household tasks for him-later expanding this to the outside world: using a bus pass; ordering and collecting his prescriptions; buying things in a shop etc. I think the trickle of progress has encouraged me and helped me refrain from thinking 'what was', as I cannot change that. Being involved with this project activates my brain, utilises my academic skills and hopefully keeps me at the forefront of stroke advances so that I can continue our long road ahead.

A little about Hilary

For the first fourteen years of our marriage I was a mother of three children, and a housewife, as well as doing the occasional job as for instance, a bar-maid. Our youngest daughter was born profoundly deaf, as a result of which I became interested in education. I helped out at Holiday Playschemes and helped organise and run Toy Libraries for disabled children. This led me to do an English A level when I was 34, then to get a B.Ed degree when I was 38. For a few years I worked as a Care Assistant in a Hostel for people recovering from mental illness, eventually getting a job as an English teacher when I was 44 years of age.

Life with David has obviously been very difficult since his stroke, but my experiences in life have given me a certain amount of patience, something that is greatly needed in our situation. I can communicate in British Sign Language, but David, sadly, can't. He tried to learn over twenty years ago but found it impossible to remember which hand to use, and/or which sign meant what. Anyway, it would be almost impossible to use British Sign Language as he only has the one hand now, so his iPad, with its Grid Player 'qwerty' keyboard, and space for words to be typed, is absolutely invaluable, and has 'saved our lives' nearly every day for over five years now.

A little about David

David studied psychology at University, became a Social Worker, which job he did for many years, ending up as an Assistant Manager, then became a University lecturer in Social Work. He had a severe stroke at the age of 65, caused by a clot, mostly caused by more than 40yrs of smoking even though he had given up 7 years before. The damage was in the left brain which left him with great difficulty in forming and saying words - despite sessions of speech therapy and regular exercises the damage remains very severe. David can't use the telephone, he finds social situations very frustrating (so avoids them a lot of the time!), and gets very miserable when I can't understand what he's trying to say. Another effect of the stroke was to partially paralyse his right hand, particularly the thumb and index finger, making fine movements impossible, such as cutting up food and typing. Again, despite various methods, exercises and devices the damage remains severe. Just to aggravate his disabilities, his hearing, which has been deteriorating over the last twenty years, has got even worse, limiting his social activities even more, especially in public with a lot of background noise.

In David's words: "Unlike some stroke victims, I have been lucky enough to have been nourished and protected by Hilary through our 48 years of marriage. Even so, our lives have been irreversibly damaged by the stroke, compounded by the poor hearing and compensations are hard to find. After five years I routinely get dark moods, depressed, enraged and desperate, and this has put a heavy load on Hilary as my prime carer."

ABOUT THE AUTHORS



Joanne Woodford is an Associate Research Fellow within the Mood Disorders Centre at the University of Exeter with a special interest in developing and improving access to evidence based psychological interventions for people with depression, especially for carers and relatives of people with physical health difficulties, such as stroke. Joanne has previously co-developed an online CBT self-help treatment for postnatal depression and contributed to the development of a treatment for people with chronic physical health conditions. Joanne is also involved in several educational programmes directed at training mental health professionals in the skills required to support patients in the use of CBT self-help materials.



Dr Paul Farrand is a Senior Lecturer within the Mood Disorders Centre and Director of Psychological Wellbeing Practitioner training within Clinical Education, Development and Research (CEDAR) at the University of Exeter. His main clinical and research interests are in the area of low intensity cognitive behavioural therapy (CBT), especially in a self-help format. Based upon his research and clinical practice he has developed a wide range of written self-help treatments for depression and anxiety.





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