Roy Remer Interview

Karen Wyatt: [00:00:00]

Today I'm very happy to welcome my special guest, Roy Remer. Roy is the author of the book Zen Caregiving: How to Care for Yourself While Caring for Others. An educator and end of life caregiver since 1997, he is the executive director of Zen Caregiving Project in San Francisco and the lead creator of the Mindful Caregiving Education Curriculum.

A dedicated practitioner in the Soto Zen tradition, Remer is a student at San Francisco Zen Center, and you can visit the website zencaregiving.org to learn more about- the book, but also Zen Caregiving and what it offers. So Roy, welcome and thanks for joining me today.

Roy Remer: Thank you, Karen.

It's lovely to be here. I appreciate it.

Karen Wyatt: Yes, I've, really been looking forward to our conversation- Oh, good ... since having the chance to read your book, and I feel like it's something so [00:02:00] important right now that we be offering support to caregivers- with just all of the family, unpaid family caregivers out there currently, and how many more caregivers we will be needing in the coming- in the coming decade or so.

Roy Remer: Yeah, it's interesting to look at how it's grown just over the last 10 to 15 years. Yeah, when I started doing this, I think the number that was being used was 43 million, and, it's increased by about 20 million of family caregivers, and then we know about all the paid caregivers out there.

So it's, it's the backbone of our health system, I would say.

Karen Wyatt: Yeah, so true, and I think it's an often neglected group of people. Even me coming from the medical profession, I feel like our awareness in the past of the stress that caregivers are experiencing was so limited. I- Yeah ... I look back and think of how often we just failed to even ask the caregiver, "How are you [00:03:00] doing?"

Or, "What do you need?" And so I'm really happy to see the trend changing, that we're starting to focus more now- Yeah ... on the needs of caregivers.

Roy Remer: It's nice to see, a lot of health systems now using these, caregiver assessment tools, to identify family caregivers who are at risk. I agree it's taken way too long, but I think we're moving in the right direction.

Karen Wyatt: you've written a very powerful book that I think is a, it's a tremendous resource for someone who's caregiving, but I actually think most of us should be reading your book and developing practices from it now before we become- ... caregivers. I think we need to anticipate, many of us will end up at some point in our lives becoming caregivers, and this book is a way to prepare for that.

Roy Remer: That's right. it really is just part of the human experience, right? someday we'll all, need care of a caregiver, but, most of us, if not all of us, sooner or later will find ourselves [00:04:00] in the role of caregiver. And I like to say I, I take a very broad interpretation of caregiver, and I think, we talk about these numbers of how many family caregivers are out there, but a lot of people are providing care in one form or another, but they're not identifying as caregivers.

they might just feel like they're a daughter doing what a daughter does for a parent or a spouse doing what a parent or what a spouse just would naturally do, right? Yeah. But, we're all caring for others in some way. Yeah.

Karen Wyatt: Yeah, so very true. I'm interested to hear just a little bit about your own story and what inspired you- to write the book.

Roy Remer: Thank you. I was fortunate to stumble upon the Zen Caregiving Project here in San Francisco, California around 1996, '97, and I had experienced the recent death of a beloved grandmother, [00:05:00] and, we called her Bubbe Sylvia, and we were very close as I was growing up, and she was a huge presence in my life.

And when she died right around that time, I found myself back in the San Francisco Bay Area working for a small Buddhist publisher as it happens, and I met a couple people working there who, had this incredible capacity to just listen and hold my story of grief- And, in sharing with them one day they said something to the effect, we're volunteers at this organization, and we think you'd be interested in this work."

And so they were volunteers at Zen Hospice Project. They introduced me to the organization, its training, and in '97 I went through the training, and it was life-changing.

it really, put me in contact with this [00:06:00] essential part of life that so many of us turn away from, and that is impermanence or death and dying.

And it really was supportive for me in not just processing the death of my grandmother, but in, reclaiming, a relationship to this, natural, essential part of life, which is death. it took me a year or two before I realized that I wanted to make this the focus of my life, this kind of showing up for others in that context.

And it took a while to, navigate this career transition, but I ended up working for the organization in 2010, and I've had a number of different roles. so in about 2015, I was running their wonderful volunteer program, and we had a really brilliant, staff person who was in the role of director of training and education.

And [00:07:00] she and I decided to take the volunteer training that had been in development for many years and to, reformulate that training into something for caregivers out in the community, both clinical caregivers and family caregivers. And that was the beginning of what we call mindful caregiving education.

So I've had a lot of fun developing the curriculum with colleagues and delivering our courses to caregivers, and to witness caregivers who show up for these classes with us With, a sense of hopelessness. they're really not sure if they're going to survive the experience. And we begin to share with them some of these approaches that are rooted in this 2,500-year-old, wisdom tradition.

And they leave us with [00:08:00] a sense of hope, and, and a reminder that not only can they survive the experience of caring for a loved one, but it's possible for them to thrive in the role. And so I have wanted for a number of years to, honor my teachers and to honor the teachings that I've received, and to take this curriculum and kind of wrestle it into the form of a book so that people would have something that they could turn to when they're feeling, emotional challenges.

So this was the beginning of, Zen Caregiving: How to Care for Yourself While Caring for Others.

Karen Wyatt: That's a really wonderful story of how it just, the book naturally evolved- ... from the work that you're doing. And as I said before, it's now here at a time when we really need this kind of teaching.

And as you said, it is, actually ends up being hopeful. And I, [00:09:00] that's one thing I take away from the book is that it, it helps you realize the sound of

having to care for a loved one for possibly years, that sounds daunting and- ... terrible to some people. But the book gives us the hope that this can actually be a pathway for our- for our own growth. And, That's right ... as you said, to be life-changing.

Roy Remer: Yeah. Yeah, I love the way you expressed that. I do think caregiving can be a pathway for growth and transformation. And what I love about this vision is that as we grow and transform in the role, someday, like everything, it will end, and when our caregiving responsibilities are over for one reason or another, we can find ourself with, with these jewels of, wisdom and teachings that we've acquired, these gifts really from the experience.

And as I like to say, these are not our gifts to keep [00:10:00] for ourself, but they are to be given away. And as I mentioned at the outset, each of us someday will need the care of a skillful caregiver, and so there are those coming up behind us, and we can take what we've learned from the experience and share that with others who will someday be in the role.

it's a beautiful vision, but I don't want to underestimate or, minimize the burden that a lot of caregivers face in the role. it can be a really heavy lift, especially, as as, the illness progresses of the one we're caring for. And there are certain illnesses where the burden is, much higher and can really take its toll on people.

And something that you alluded to, early on was I think these are approaches and skills that we should learn even before we're in the role of caregiver. I think of them as a insurance policy of sorts. we have developed the skills that we can [00:11:00] call on when we're in that role.

Karen Wyatt: It's so true.

And these are really life skills that- ... that can help us live life better and face any other challenges that come along our way, during life, which they surely will because that- ... that's how life is. But, particularly for caregivers to feel... I don't know if, I don't know if prepared is the right word, but to it feel, to feel at least that they have some tools that they can use-

just to care for themselves better while they're in the process of taking care of another.

Roy Remer: adding more tools to one's tool belt, right? I think of these practices as, moment-to-moment self-care. So a lot of us- use this term self-care, and it can actually be triggering for, some caregivers because it can be, an

easy way to address one struggle by saying something to the effect, maybe you could make more time for self-care or [00:12:00] practice better self-care."

And that doesn't feel so great to a caregiver who's really trying to manage all the demands. So because the practices that are included in the book are rooted in mindfulness, this awareness of present moment, I like to think of them as moment to moment self-care, and the book very much goes into how people, caregivers can use these practices in the midst of the activities that they're already engaged in by necessity or by choice.

I think they're really relevant and very practical in that sense.

Karen Wyatt: Yes, y- there are wonderful, practices, early on in the book for mindfulness, but just being present, learning how- Yeah ... to be present with another person. And I feel, I long felt in hospice that some days, really the only thing that we may have to offer when we go to visit a patient and a family is just our presence, but that is [00:13:00] actually- huge and very powerful if we can be fully present.

Roy Remer: It is huge, and sadly, it's huge because it's so rare in our culture these days. And a definition that I like to use, which I want to give credit to Jon Kabat-Zinn for this particular way of defining mindfulness, paying attention to the present moment on purpose without judgment.

And this idea of paying attention to the present moment on purpose, it reminds us that we can actually step back and be the observer of our own experience and notice when we become distracted by unuseful or unhelpful thoughts or by the pull of the devices that we all carry around with us. And when we notice that we've become distracted, cultivating this practice, this approach of coming back to what's here right now.[00:14:00]

And because it's so rare in our culture, sadly, it's quite powerful to sit with someone who's experiencing illness and to just make them the focus of our attention, and give them that attention and what that provides Is this sense of deep human connection that someone is witnessing my experience, someone is fully here for me.

And while that may not be curative, I do believe and I trust it's deeply healing for people who maybe feel a sense of isolation in their illness or feel like no one really understands or no one has time for me. And, even if we only have a few minutes to spend with someone, can we use those few minutes to be fully present?

Karen Wyatt: and I think for a caregiver who has a huge to-do list of- so many tasks that have to be done, and they're focused [00:15:00] always on h- how do I do all the things to take care of this person, to feel permission to just sit and be still and quiet at the bedside, even for a few moments, that can

That helps both the patient and the caregiver.

Roy Remer: Yeah. It's so true. And, we talk about, reciprocity of care. we can recognize that this is not a one-way street. It's not just about, providing something that maybe is missing for the person we're caring for, but rather we're getting something out of the experience as well.

And, I love this idea 'cause even when someone's dealing with, long-term chronic or terminal illness, they still hold these essential human needs, including, caring for others or showing up for others. So if we, enter into the experience with a mindset of service rather than helping, then it puts us in direct [00:16:00] relationship and it puts us on equal ground, if you will, with the person we're caring for, and it opens up to the possibility that, we can enhance their sense of meaning and purpose and wellbeing by sometimes letting them support us in some small way, right?

But this idea of reciprocity, I think is really, really an important one.

Karen Wyatt: I like that you emphasize serving rather than helping- ... 'cause helping almost implies that we're going to measure the outcome of the efforts that you put in. Did it help? Did the person get better? And that puts so much pressure on the caregiver when actually that shouldn't even really be the motivation.

The idea of being of service- ... and acknowledging many times we actually, we can't really help. We're just being of service. We're being there in the moment. We're doing whatever we can.

Roy Remer: Yeah, absolutely. And, often [00:17:00] I think caregivers become really attached to outcome. They have a particular agenda, and, this can actually be separating rather than connecting, right?

And so we talk about a fix-it mindset, and people who are formally trained as caregivers or who are inclined toward caregiving, or even people who are thrown into the role, maybe felt, they felt like they did not have a choice, they can, get very attached to fixing a problem that they're witnessing in front of them.

And sadly, that, I think, turns the person who's receiving care into an object, if you will. something just to be fixed or improved or changed. And when we can let go of a fix-it mindset or let go of our agenda, it [00:18:00] can really bring us closer to each other and provide that kind of deep human connection that I'm speaking of.

Karen Wyatt: Oh, that's just so very true, and there was a beautiful story that you told using a patient with dementia as an example. And, the family coming and feeling somewhat distraught because she didn't recognize them and didn't know who they were and trying to remind her, "Remember, I'm your daughter.

Remember?" we did this and that." In a sense, if we can get out of that fix-it mindset of I, I have to help her remember and, you pointed out, you can say it better than I can just being there with her.

Roy Remer: that's right, and it- it's totally understandable. family members, get really attached to the person they're caring for, staying how they've been, how they've known them.

They get attached to the person they're caring for, maintaining the sense of identity that they've held in the family relationship or in the friendship, and it can be hard to give that up. [00:19:00] But I think a useful inquiry for caregivers, I know it's useful for myself, is when I'm feeling an inclination to do something or even say something, if I can ask myself, "Is this really for me or is this for the person I'm caring for?"

And sometimes we're not sure if it's for the person we're caring for. But usually we're pretty clear if it's for me. And then I think it makes sense to check in. is there a different way I can approach this, or can I tend to my own emotional needs if I'm acting from a place of, neediness to address my emotional concerns or my developmental issues, right?

and so I think ultimately it's just about awareness. Like, how can we deepen our sense of awareness of self, awareness of the other, [00:20:00] so that at least we're making a conscious choice, we're responding rather than reacting. And I think this is part of the essential qualities of, mindfulness really, is slowing things down, creating that pause between, what's happening and our reactivity or our response so that we minimize reactivity and we respond thoughtfully or mindfully

I think as you were pointing out, this is healthy for the person receiving care, but it's really healthy for the caregiver. And, both can grow in this relationship.

And one thing I've noticed working with a lot of family caregivers is that, I think it's fair to say there's a misconception where They are so [00:21:00] focused on the needs of the person they're caring for that they think they need to set their own needs aside, and I think that just sets us up for problems down the road.

So if I can tend to my own needs, tend to my own process, and at times actually prioritize my own needs, then I think it really shifts our relationship to the person we're caring for, and it allows us to stay in the role with more, sustainability and an enhanced sense of wellbeing. So it, again, it can't be one way.

That's ... It's really not fair to ourself, and it's not fair to the person we're caring for.

Karen Wyatt: Yeah, so very true. and it seems to me, I don't know how, if it goes unrecognized sometimes that caregivers are constantly experiencing grief of their own as- ... they're, they are watching [00:22:00] their relationship with their loved one change before their very eyes and losing things every day that they used to be able to count on, as part of that loving relationship.

And so it's this ongoing grieving that- ... that changes and grows every day, while at the same time I know many caregivers experience guilt as well because sometimes- they don't want to be doing what they're doing. sometimes they feel exhausted, and they may feel inner resentment about it and have- guilt about that as well. So there's so much emotion involved in caregiving- ... that- That's so true ... that we downplay or we don't- We don't al- allow it to be normal.

Roy Remer: Yeah, I think we do downplay it, and I think it can feel, abnormal or it can feel somehow selfish, and so we suppress it. Yet again, coming back to awareness, when we feel resistance, [00:23:00] as we all feel resistance from time to time, or resentment or just, as you say, guilt or exhaustion.

And so there's a chapter dedicated to self-compassion, and I find the self-compassion practices so useful so we can tend to our own needs. We can self-soothe or coach ourselves in experiences like that. And- As a teacher out here likes to say, a Dharma teacher, a meditation teacher, "If our compassion does not include ourself, it is incomplete."

So it really is essential that we cultivate the capacity to hold our own experience with kindness and compassion. I think a lot of caregivers would say it's much easier for them to experience compassion for someone else than it is for

themself. [00:24:00] But I think, and there's a whole chapter on the barriers to compassion, but I think if we're unable to truly express compassion to ourself, we're gonna get blocked in terms of extending compassion to others.

We're just going to meet our limit more readily. So it can be so helpful just to, to pause, to acknowledge the experience of difficulty, of challenge, of suffering And then to remind ourselves that in this human experience, this is what it can be like, All of us suffer from time to time. It's just the way it is.

And in that sense, we're not alone. there are others out there who are in similar circumstances, different of course, but similar circumstances. And so I would hope that when people recognize that, there's a, we [00:25:00] can minimize a sense of complete isolation. And then thirdly, just recognizing that if nothing else in this moment of difficulty, perhaps I can hold my experience with kindness towards myself.

It becomes a way to reset, to fully acknowledge and then move into what comes next.

Karen Wyatt: I love that practice.

That it ends with that may I just simply be kind to myself- ... because that's really what it comes down to. And, whatever in this moment it takes to be kind to myself, that's really, that's the goal.

And I appreciate that you talk about really how ubiquitous difficulties and challenges are in life. I can accept if you look at our popular media and- ... social media online, it always these images are being pro- projected that somehow everyone else is living some perfect life and-

Roy Remer: Yeah

Karen Wyatt: everything's wonderful for them, and they're happy- Yeah ... [00:26:00] all the time, and it's such a lie that is really hurtful to most of us. It, we'd be so be- so much better off if we had a really clear understanding of just how hard life is for pretty much everyone in different ways, as you said, but-

Roy Remer: it's not easy.

It's not easy. And, a colleague likes to say, we can meet each other in our shared experience of vulnerability. And I think for a lot of people, a lot of caregivers, it can be really difficult to acknowledge our own vulnerability and allow it to be

witnessed. And, I like to differentiate between, say, emotional neediness and, emotional expression.

So I do think it's okay to share with the person we're caring for the emotions that are arising for us. And then when we feel [00:27:00] like maybe we're getting too close to that line where we cross over into emotional collapse or neediness, then we really need to step back and look at, what are the resources I have access to, whether it be, a conversation with a friend or, even the support of a therapist, for instance.

But again, it's really about being honest with oneself and allowing, our authentic experience to show up in the relationship

Karen Wyatt: Yeah, and once again, the things we're talking about, mindfulness, presence, self-compassion- and being vulnerable, these are actually things we can practice at and get better- at doing. no one... It doesn't come naturally really to any- ... of us at the very beginning, and that's why I say- I think that's right ... let's read the book in advance because- Yeah ... the tools, once we get a little bit more skilled at [00:28:00] some of these tools- ... it will benefit us so much when we are in these situations and when we're being challenged.

Roy Remer: Yeah. And, as I said, I take this broad interpretation of caregiving, but, maybe we are in a workplace, and we're working with a colleague, and something seems off that day. or perhaps we learn that they're caring for someone at home, So we can show up in a different kind of way.

So I guess the point is, we live these r- relational lives. We are relational beings, right? So I was sharing with someone recently, while perhaps in some schools people teach compassion, for instance, to kids, wouldn't it be lovely if, say, compassion was, part of the curriculum like mathematics or spelling or, some of the basics.

So a lot of us find ourself in the role, and we're really not prepared. I have heard many [00:29:00] stories of caregivers, whose loved one is being discharged from a hospital, and on that day, things really change for them, and they haven't been trained in some of the more practical issues, the hands-on issues like activities of daily living, assisting with these sorts of things.

But most have not been prepared emotionally for the role. yeah, may it be so that people are learning these kinds of practices way in advance before they need them.

Karen Wyatt: Yes. and I wonder if you have any suggestions for those of us who, who are not doing the caregiving ourselves, but we are support people for caregivers, where someone we

love is in the role of caregiving for someone else. What can we do to help them or to be of service to them, I should say, not helping. But what- ... do you have tips for how to be beneficial to them?

Roy Remer: Yeah, I love this question, and I think there's a lot that people can do. I [00:30:00] think, I love the question because it acknowledges that a lot of people feel helpless.

they have a friend, they have a colleague, they have a family member who's- in the role of caregiver, and that caregiving can be high burdens. They see that they're suffering, and they don't know what to do. And I really want to honor the inclination itself to show up and do something. it's a beautiful inclination.

it's an expression of a warm, opened heart and concern. I think what could be really useful to a caregiver is to invite a conversation. The kind of conversation where as a friend, as a family member, as someone who wants to support them, you're willing to set your story aside and just hold [00:31:00] space, as I like to say, to just be a listening ear and, offer some inquiry around what is the experience like for this person?

How is it going? how do you think you're doing? what have you not shared about the experience with others? I'm sure you're familiar with this whole body of work, narrative medicine, right?

And when people are ill, it becomes really important for them to be able to share their story.

I think this is equally true when someone's in the role of caregiver, whether they're working in a clinical environment or they're working within a house with a family member. being able to share your story becomes really important, and it does, break down the experience of social isolation that can be really common for a lot of caregivers.

So a willingness to hold [00:32:00] story. I used to say In the context of, grief and end of life, ask someone what they need from you and be ready to show up for that need or to say, "Yeah, I can't quite do that, but I can do this." But then I've rethought this a little bit based on some feedback that I've received and

what I've heard from other people, and I think what can be really supportive is to just decide what you're willing to do.

For instance, take a meal to a family caregiver and just deliver it and... 'Cause as you were pointing out, and it's so true, a lot of family caregivers, they're even having difficulty, like preparing meals for themself because they're so busy. So that might be a really nice gesture. there are resources out there, and as self-serving as this sounds, maybe, you could gift a book like this book, and, [00:33:00] that might be a nice offering.

So it can also be really supportive, I think, to let the person know that you see them. Like you are witnessing the burden that they're carrying, and to let them know that you're thinking about them. And if you are available, let them know that you're available. depending on the relationship you have to the person who's receiving care, you could offer respite.

A lot of family caregivers, they have difficulty stepping away, either because of their own sense that they need to be there or for real practical issues. many of our classes are delivered remotely online, and I see a lot of family caregivers showing up with their loved one, with the person they're caring for, particularly for a family member who's living with some type [00:34:00] of dementia diagnosis.

Like these folks, can't really be on their own, and so it becomes a twenty-four/seven proposition, for the caregiver. So can you step into that role, or, step in to provide, some freedom to the caregiver so that they can step away? And that might be really edgy for people actually.

one of the important ideas that I try to convey in the book Is that we don't have to be an expert. We don't have to be perfect, If we can show up with presence and an open heart, that is huge, and a willingness to accept the fact that I may make mistakes. I think this is really important.

And when the family unit is experiencing illness, of course it's [00:35:00] really important, it's essential to have experts around us. skilled physicians like yourself, nurses, nursing assistants, social workers, et cetera. But, we are enough. we, a family member can be there and bring so much even when they don't have a particular expertise.

Karen Wyatt: Yeah. And when you talk about the social isolation for caregivers- Yeah ... I remember reading a post from a young woman who was care- caregiving for her mother who had cancer- Yeah ... and a group of the

young woman's friends invited her out to dinner one night because someone else was there with her mother.

Yeah. And she said, "I didn't belong in that group anymore." Oh. "I'm not like them anymore," and recognized being a caregiver changed her sense of self- Yeah ... and who she was in a way. And it ended up making her feel a little bit more isolated being around these friends. But when you said offering a chance for the caregiver to feel seen, [00:36:00] I- Yeah

was thinking what if the friends instead had just said, " tell us what this is like for you. Tell us what's happening for you." Yeah. Instead of trying to create a scenario that from their past, something they used to do together, but to be willing themselves to stop and listen. what are you going through?

What is it like? That, that being seen is so valuable.

Roy Remer: Yeah, we talked about how caregiving can be this transformative experience, so our sense of identity likely will change. And as you say, we'll perhaps arrive at a place where the relationships that have served no longer serve, and that can be painful.

caregiving can be heavy, and if people aren't willing to listen or to acknowledge the gravity of the situation, then it can feel superficial sometimes to be with others [00:37:00] who, because of their life circumstances, no judgment, but they just have different concerns. so this piece about just, witnessing and creating space becomes really quite important.

Illness changes us whether or not we want to be changed by it, and I think that extends to the people who are caring for us. it does change us. I use the language of rite of passage. caregiving, really becomes a rite of passage and initiation, and as is true in all rites of passage, all initiations, yeah, there's a dismembering, right?

There's a falling apart of old self-images, self-identities. And while this can be painful for caregivers, it's a really rich time, I believe. And, if we can allow ourself to acknowledge and experience these changes, [00:38:00] then it becomes easier for us to show up With awareness of our biases or our attachments so that the person we're caring for can also stay current with their circumstances of illness because they're in a process of change.

they're in the thresher. They're on this threshold of being changed as well. And, if we're not prepared to allow their changes, it can be very stu- stifling for someone who's experiencing illness and, being changed.

Karen Wyatt: And you mentioned for yourself, learning from impermanence. And I really feel that this is what I experienced in working with dying patients- in hospice is this real gift of becoming aware on a daily basis that I will die one day. I will also become ill, and die one day like the patients that I'm serving right now, [00:39:00] and it really completely changes your perspective then on life and how do I live moment to moment and- ... and day to day, and there's a true gift in that.

Roy Remer: Yeah, as you've discovered, I'm sure, when we turn towards, impermanence and death as a teacher really, as a reflection of our inherent nature as humans, there's something really beautiful that happens, and, we can quickly arrive at a place of just incredible gratitude for what's right here because we recognize how fleeting it is, and we begin to recognize that everything goes sooner or later.

So we can cherish what's right here and really see it for what it is. There-- The third section of the book is on loss.

And so mindfulness, compassion, loss, and then the fourth section is intimacy. But [00:40:00] it felt really important to me to frame loss very generally because caregivers, quite likely are caring for someone who is years away from their death, right?

May it be May, people be caring for someone who's gonna live for many years. so loss comes in many different forms, so there's a lot of content in the book about end of life, but, it is not a end of life book. it's really for the long arc of caregiving. But, when people do reach the end of life, there's so much going on, it can be emotionally so chaotic really.

And so I think it becomes really important for caregivers to really look at their own lifelong experiences of loss and grief, and to check in with themself. have I [00:41:00] given this, piece of grief in my life its due? Because a lot of us have a default response to loss and grief, and for a lot of reasons, many of us really do our best to suppress our grief response or our grief experience.

We may feel like we don't have time for grief, or we're not comfortable having it being witnessed. and grief is painful, grief is really defined by many different emotions, but, sadness is really uncomfortable, and so we try to push it away.

But if we don't give ourself enough of an opportunity to process our own grief, I think it's really difficult then to hold space for someone who's ill and so much is falling away for them.

if I'm sitting with a family member who's nearing the end of their life and [00:42:00] they're showing signs of grief and sadness, I will very easily get triggered emotionally if I haven't spent enough time with my own grief processing. And it's not that we ever get beyond grief, because I think we just get more comfortable, we become more comfortable carrying it along for the ride, integrating it into our life.

But if we haven't cultivated awareness of our own grief emotions, they can surprise us and overwhelm us very easily, and then we're just less supportive for the one we're caring for.

Karen Wyatt: Yeah, so true. Do you have suggestions for some activities or rituals or practices that can help us be more in touch with our grief?

Roy Remer: I would say, first, grief is really well-served by ritual And most of your [00:43:00] listeners probably come from some kind of spiritual or religious tradition that has many beautiful rituals to mark, say, end of life or to process grief. But I'm really fond of this approach or idea of self-generated ceremony.

And, I do talk about ritual in the book, and I really wanna invite people to craft their own rituals that serve the circumstances they find themself in. but I think the most important piece is to make sure that we are carving out some time to step back and look at our own grief experience. In terms of particular rituals, ritual is a loaded word, right?

it ... [00:44:00] Rituals can be, very ornate or very detailed, very complex, but they don't have to be. If you have time for, say, a walk around the block, can you dedicate that walk to the losses that you've experienced recently or in the past? And as you set out on this walk, imagine a, a threshold, a border, and you step across that border, and now I'm gonna let myself just really dwell in whatever grief arises for me, and just stay with it and complete your walk and then cross back over.

It can be as simple as that. Or if your loved one, for instance, can no longer, eat some type of food, maybe you have a meal for them and notice what sadness comes up for you as they [00:45:00] lose their inability to eat or enjoy foods of this sort. this caregiving work demands a lot of creativity of us, right?

And so can we pause long enough to acknowledge what's here, think of what's needed, and then be creative in giving ourselves permission to, honor the grief experience in a way that's meaningful for us? and in the book, I give a number of different ideas on what people can do- ... to really acknowledge and honor their grief.

Karen Wyatt: Yeah. That's really wonderful and such a good point. It requires creativity, and the more we have practiced with tools like this- ... the more we can care for ourselves And be in a little bit better place, the more energy we'll have for this creative thinking that- ... that might help even more.

And- so I'm just making a point again of read the book now. Thank [00:46:00] you. Yeah ... because it's, it is really so valuable. I'm even thinking, as you said, some of us will end up being the people receiving care. And that it could actually be helpful for us, I mean- That's right ... for a person receiving care- to have read the book and have a sense of what the caregiving experience is like in order to give that reciprocal- ... empathy in a way. exchanging that. Yeah. and being aware of what your loved one who's o- who's offering care- ... might be going through.

Roy Remer: that's absolutely right, and I'm happy you brought this up because, something that I'm really intrigued with is this idea of learning how to receive care.

Yeah. I live with a chronic illness. I live with Crohn's disease, and when I'm having a relapse, it can be really horrible. And, sadly, it was ... Yeah, during the pandemic, I had a really bad relapse, and in that moment of my wife having to show up for me, I [00:47:00] was able to recognize this is hard for me to receive her care, So I think each of us could learn lessons on how to receive care, allow ourselves to just be cared for, and to bring some grace to the experience. But you're right. the book will, would be helpful for us when it's our time to receive care just to understand the experience that the caregiver's going through, and ways that we might invite them to just pause, It ... I talk in the book about this is one of the benefits of mindfulness, but, we have these mirror neurons in our brains, and we're constantly responding to each other's energy. And so all of us have been in experiences where we're with someone who is very agitated or upregulated, and if we're not paying attention to our own process, we become agitated as well.

But- As one of my teachers used to say, [00:48:00] all it takes is one person in the room who's calm and grounded to change the energy in the space. So if we're following our breath, if we're feeling our feet on the floor, if we're aware

of what's happening right here, right now, it can have a really beneficial calming effect on those around us.

I- it shouldn't be underestimated. It's such a simple thing, but it can be hard to, remember to just pause long enough for three intentional breaths as a reset, To see what's here.

Karen Wyatt: Yeah. And as we, I think we alluded to before, we live in a society that's so fast-paced.

that e- everyone values speed and doing more and being more productive- that we don't get enough reminders to slow down and, as you said, take the pause and- ... get back to a calmer state. But in some ways, if you think about it, the person receiving care, that may be something [00:49:00] that they are learning themselves because they're- That's

Roy Remer: right ...

Karen Wyatt: they cannot be productive in the way they used to be, and active.

So they've been put into a situation. Maybe that is a gift they give. They become the calm presence in a way. it goes back and forth.

Roy Remer: That's right. It goes back and forth. And, especially when someone's bed-bound It, can be like the meditation retreat experience. their world gets much smaller in a way, and so they beca- they become so highly sensitized to the energy around them.

And as they slow down and as th- they become more sensitive, then they perceive how we're doing. And so this is where authenticity becomes really important. This is also very true for people who are living with dementia. they may lose access to their memories and to their language skills, but they're, really highly attuned to emotions.

So if we [00:50:00] enter into a room and we're agitated or we're stuck in a big emotion, and unaware of it, they're gonna know, and they'll respond accordingly to our energy, yeah, we're all in this together. It's just seamless.

Karen Wyatt: Yes. Yes. I remember, in my h- hospice days caring for a young man with multiple sclerosis who was near the end of his disease process, but- he would say to me every day when I would visit him, he would say, "This is just what life is bringing me today." Beautiful. And that stuck with ... That made

such an impression on me. It stuck with me, and I find myself every single day saying- ... "Oh, wait. I have a flat tire. Oh, I forgot to buy eggs yesterday.

Oh, Every little thing to stop and say, "Oh, this is just what life is bringing me today, and that- Yeah ... that's okay. I can-"

Roy Remer: Oh. What wisdom. Yeah. And this is what we experience with people who are at the end of life, [00:51:00] They, ... It takes us to our essence, right? And we begin to recognize what's truly important.

And, Yeah, there are so many distractions, but we are storytelling creatures, so we encounter something difficult or we have a challenging discomfort, and we are very quick to layer on top of it all kinds of stories. "Where did this come from? Is it gonna get worse?" "Am I enough for this experience?"

And if we can just quiet down that chatter and just, acknowledge that this is simply what life is presenting in this moment, then, yeah, it opens up s- so many possibilities for us. it gets us out of that contracted state of stuckness where, oh, we're defining the situation in a particular way, so

Karen Wyatt: yeah.

Yeah, and where that creativity that you mentioned- ... [00:52:00] has a chance and opportunity to arise then- ... wh- when we're not stuck. That's, that's- That's

Roy Remer: right ...

Karen Wyatt: that's really beautiful.

Roy Remer: I'm reminded of that bumper sticker. People have seen it, I'm sure. don't believe everything you think,

Karen Wyatt: Yeah. So how do we- You know, step back and question the validity of the stories we're telling ourselves. It's to pause and to be with what's true in this moment, the breath, physical sensations, the sound of the birds around us, coming back to what's right here.

yes. and, it reminds me to, inform people about the zencaregiving.org website because I noticed that you have weekly meditate, gui- guided meditations there, like actual real tools people could use in the moment to help them if they're, if they are trying to work on some of these practices.

So maybe you could tell us what else is available.

Roy Remer: Thank you. Yeah, so [00:53:00] on our zencaregiving.org website, you would find ways to register for some of our caregiving classes, and these are all offered remotely, and we've developed a self-paced course. So while a caregiver wouldn't get the opportunity to connect with other caregivers in the course, they could do it on their own timeframe when they're available.

But the courses, the other courses we teach are interactive, and, they cover a lot of these concepts, so the classes are there. We have a lot of resources for caregivers, articles and blogs and practical resources. In addition to the weekly Tuesday morning meditations for caregivers, we have what we call our, support circles, and those are opportunities for caregivers who have taken a class with [00:54:00] us to gather with other caregivers and talk about their experience, in a non-judgmental kind of way.

so I hope people will come and visit us, and they can find out more information about the book at the website

Karen Wyatt: Yes, and the title, I'll say it again, of the book, Zen Caregiving: How to Care For Yourself While Caring For Others by Roy Remer. and I just can't, tout it enough. It's really is an excellent book.

Thank you. And, I feel like it's one that people should have on their shelves in advance because you don't really know when you might need this information. You don't really know. Things happen suddenly. And an e- excellent book for everyone's library, but to give as gifts, as you said as well, to-

Roy Remer: friends who are

caregiving. thank you for those kind words. And, my greatest hope for this book is that somebody benefit from it, And it will minimize their suffering even just a little bit. And, I'm really grateful for the opportunity to be here and to [00:55:00] talk with your audience, and, just deep sense of gratitude to you and the folks out there listening and the work that they're doing.

Karen Wyatt: Thank you so much, and I hope as well that there are caregivers listening in who- ... feel, that they've benefited just from our conversation. I know I have. I'm really grateful to you.

Roy Remer: Same. Yeah.

Karen Wyatt: All right. thank you. Good luck with the book. Thanks. And may- maybe we'll have a chance to talk again someday in the future.

I'll look forward to that. Thank you.

Roy Remer: Yeah.