

How to Ask for Help

Suggestions for Patients and Caregivers

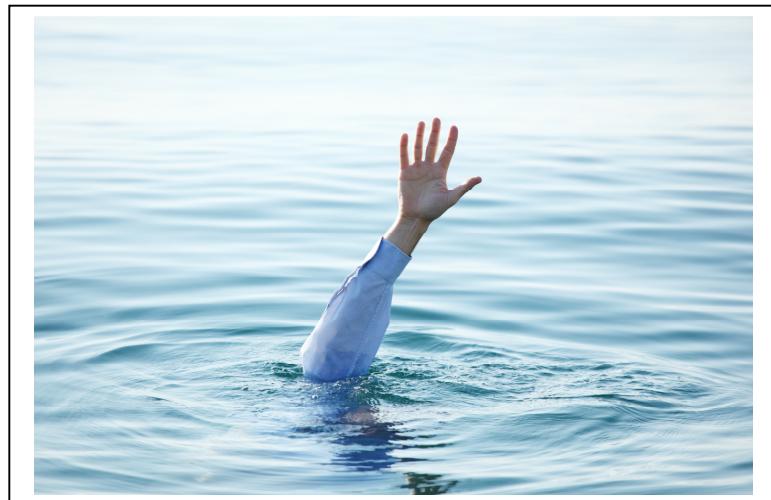


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By Terry Murray

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Introduction

My sister Roxe has always been generous. Generous to a fault. I've been a recipient of that generosity, as have friends in need, friends on their birthdays and other holidays, and complete strangers such as the countless people behind her in the Tim Horton's drive-thru whose coffees she bought.

When she was diagnosed with metastatic endometrial cancer, I was happy to travel the roughly 450 kilometres (about 280 miles) from my home in Toronto to hers in Ottawa to be with her for chemotherapy sessions and the days afterward. But for the times I couldn't be with her, Roxe was reluctant to ask any of her friends or neighbours for help.

"What about asking someone for a drive to the hospital for a chemo session?" I suggested, knowing it would be a longish trip across town.

"It's too far, too early in the morning – and during rush hour," Roxe said. "I can take a taxi."

"What about asking someone to come and sit with you, after rush hour?" I said.

"I can't ask someone to sit with me for five hours!" she said.

"You could ask them to sit with you for an hour," I offered, to which Roxe just shrugged.

"What about groceries?" I continued.

"The store delivers," she countered.

I was fighting a losing battle with my sister's stubbornness. My work and responsibilities in Toronto didn't allow me to just pick up and move into Roxe's house for the duration. I would come to Ottawa as often as I could, but I knew I wouldn't be able to be there for at least one cycle of chemotherapy. I understood her reluctance to impose on others, but I soon learned that her friends and neighbours were almost desperate to help.

On my first trip, I rented a car, but not one that would be waiting for me at the train station. I called Roxe's neighbours Janet and Graham and asked if it would be possible for one of them to pick me up at the train and drive me to the rental location. "Finally!" said Janet. "I can do something!"

I'm sure my sister is not the only person who has trouble asking for or accepting help when she's actually in need of it. I decided to compile a brief guide for other reluctant people (and their caregivers) in similar situations. I relied on my own thoughts about asking for (and accepting) help, friends' advice and the recommendations of others who have written on the subject. I've had mixed success with the suggestions here (and I do not mean to suggest that my sister made all the arguments against asking for help listed here), but I offer them in the hope that they may be helpful to you.

Terry Murray – Toronto, December 2016

Chapter I: The Need for Help Becomes Apparent

Any serious illness affects patients' ability to look after all of their own needs. The luckiest patients are those who have loving family members who live nearby and are willing and able to help – and can even anticipate needs their patient-relatives may not have thought of.

But not everyone is so fortunate. Even for those with helpful family members, patients* may occasionally need to request the help of – or accept unprompted offers of assistance from – friends and neighbours.

When friends and neighbours are told of the patient's illness, their response is almost invariably, "Call me if you need anything!" "Anything" covers quite a lot, and friends and neighbours (hereafter referred to simply as "friends") may not know exactly what they can do.

Other friends may learn about the patient's illness through the grapevine or rumour mill, or may not have heard at all.

So there are strategies to taking up friends on their offers of help, and initiating requests of the others. There are also ways to determine who is actually willing to make good on an offer, and who is merely being polite.

*In the world of the sick, there are at least three kinds of people – patients, caregivers and health-care workers. "Patient" may seem a coldly generic term, and not one that the ill person sees him- or herself as, but it's convenient shorthand here.

Chapter II: The Resistance – and How to Overcome It

- **FEAR** of being a bother or a burden
 - “She has kids to get to school” or “She has kids at home.”
 - “I think his own mother is sick.”
 - “I don’t want her to have to drive in rush-hour traffic.”
 - “My appointment is too early in the morning.”
 - “I can’t ask someone to sit with me for five hours of chemotherapy!”
 - “My friends will disappear because they’ll think I’m going to become completely dependent on them.”

COUNTER ARGUMENTS

“How would you feel if someone could have used your help and you would have liked to help, but the person decided for you that you were too busy?”

“Your friends love you and want to help.”

“This will make your friends and neighbours feel good about themselves.”

“No, you probably don’t want to ask someone to sit with you for five hours, but you could ask for an hour or two.”

“You aren’t likely to go from zero to 60. In other words, you’re so resistant to asking for help, you’re not likely to haul off and ask for too much!”



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- **FEAR** of losing control.

“I don’t want to appear weak. I’m NOT weak!”

“What if I don’t like the way they do things?”

“I’m embarrassed if someone has to come into the house/apartment – it’s such a mess!”

COUNTER ARGUMENTS

“You ARE weak! You’re sick. You’re not morally weak or weak in spirit. Your body is weak.”

“You can make SPECIFIC requests. And yes, there might be times your friend does something differently than the way you would do it. Asking for and receiving help calls for compromise.”

“You’re sick. Of course your house/apartment is a bit of a mess. You can control who has access to your living space. You can choose whom to ask for favours that need to be done in your house/apartment.”

- **FEAR** of owing a favour.

“If he helps me, I’ll owe him.”

“If she helps me, she’ll hold it over my head. I’ll never hear the end of it.”

COUNTER ARGUMENTS

“Yes, you will ‘owe’ anyone who helps you. That’s how friendship works. But it’s not tit-for-tat. As you have been helped, so you will want to help when you’re able. And so you have helped in the past.”

“You must, when you’re able, convey your thanks appropriately. Always say, ‘Thank you.’ Sometimes that will be enough. Other times, it will be appropriate to hand-write a thank-you note. And sometimes a gift will be in order. You can ask for advice about what expressions of gratitude are commensurate with the help you’ve received.”

“If a ‘friend’ is likely to use helping you as a bargaining chip, don’t ask that ‘friend’ for help. And when you are better, reconsider that friendship.”

- **FEAR** of being rejected.

“What if she says ‘No’?”

COUNTER ARGUMENTS

“If she says, ‘No,’ she could be busy. Or there could be a million other reasons she’s not able to help at the time you asked.”

“A ‘no’ puts you no further behind than you were before you asked. You just need to ask another person or find another solution.”

TERRY’S RULE OF THREE: If a person says “No,” for whatever reason, three times, stop asking that person. The person may have said, “Call me if you need anything” just to be polite. Or he may indeed have been busy on all three occasions. But if you ask for help and are declined three times, take that person’s name off your list of potential helpers, with no ill-feeling.

Chapter III: The Help That is Needed

British poet Charles Causley (1917-2003) identified many kinds of people and their responses to another's illness in his poem "[Ten Types of Hospital Visitor](#)." They include those who, by their "ferocious goodwill," destroy hope; those who are over-optimistic; the ones who offer inappropriate religious comfort; and those who natter about trivia in order to avoid addressing the patient's situation.

The most welcome visitor is the sixth:

The sixth visitor says little,
Breathes reassurance,
Smiles securely.
Carries no black passport of grapes
And visa of chocolate. Has a clutch
Of clean washing.
Unobtrusively stows it
In the locker; searches out more.
Talks quietly to the Sister
Out of sight, out of earshot, of the patient.
Arrives punctually as a tide.
Does not stay the whole hour.

Even when she has gone
The patient seems to sense her there:
An upholding
Presence.

The sixth visitor is the rarest because not everyone knows just what to do, or what is needed.

So, patients and/or their primary caregivers should compile a list of the varieties of help they may need. For example:

Practicalities

- Buying groceries
- Picking up prescriptions
- Taking pets to the veterinarian, as needed
- Doing laundry
- Preparing meals
- Picking up mail (e.g., from a community mailbox)
- Taking garbage, recycling, etc., to the curb
- Driving to medical appointments

Social needs

- Sitting with the patient during chemotherapy, waiting for doctor's appointment, etc.
- Going for coffee (as patient is able)
- Talking on the phone, by Skype/FaceTime

Non-911 emergencies

- Practical needs (e.g., a last-minute medical appointment)
- Social needs (e.g., if the patient feels anxious, sad, worried)

BE SPECIFIC

Even a request as seemingly simple as asking someone to pick up bread and milk from the store will be easier for your helper and better for you if you are specific. What kind of bread do you want? White? Whole wheat? Absolutely NOT 12-grain? And what about milk? Whole milk? Skim? 2%?

You may feel that you are being picky, but the more specific you can be in your requests, the easier you will make for your helper – the fewer decisions he or she will have to make for you.

Chapter IV: Who Is Available to Help?

Make a list of friends near and far, friendly neighbours, and acquaintances (e.g., from church, community or professional associations).

Also make a list of community services for which you may have to pay – such as housecleaning services, churches, local associations, illness-specific organizations (e.g., the Canadian Cancer Society, which as of this writing has a one-time registration fee of \$100 for drives to and from appointments). You might need to enlist some of those.

Match the list of names to the list of tasks. For instance, if you have a friend who loves animals but isn't so good with sick *people*, that is a person to ask for help with your pets. You no doubt have a neighbour you don't know well, but who you could ask to take your garbage and recycling bins to the curb and back for you.

You might want to also consider who might be available for ongoing help (for example, asking a neighbour to pick up groceries whenever he is doing his regular shopping) and those of whom you might want to make one-time only requests.

You probably want to ask fairly close friends for emotional support – the people with whom you can share your innermost feelings, fears and hopes.

When we honestly ask ourselves which persons in our lives mean the most to us, we often find that it is those who, instead of giving advice, solutions, or cures, have chosen rather to share our pain and touch our wounds with a warm and tender hand.

The friend who can be silent with us in a moment of despair or confusion, who can stay with us in an hour of grief and bereavement, who can tolerate not knowing, not curing, not healing and face with us the reality of our powerlessness, that is a friend who cares.

— Henri J.M. Nouwen, *Out of Solitude*

But prepared to be surprised. When my mother, living in Chicago, had a severe stroke, Roxe and I called on Cara for help and advice. We knew that our very private mother had tremendous respect for Cara, and that she was a down-to-earth, practical person. Cara was indeed quite helpful, but ran out of steam after a few months. The way Cara showed her downheartedness at Mom's condition was to become impatient and often angry with us. Roxe and I also discovered that we came up with better solutions to practical problems than Cara did, even though we had to familiarize ourselves with services available in not just a different city, but a different country.

As Cara faded, Marian emerged as our chief local support. Our mother liked Marian, a friend from church, but they weren't close. I think that Mom actually found Marian a little annoying. I did too sometimes, but for the three years that our mother lived after the stroke, Marian was our most steadfast ally and most consistent visitor when we moved Mom to a nursing home.

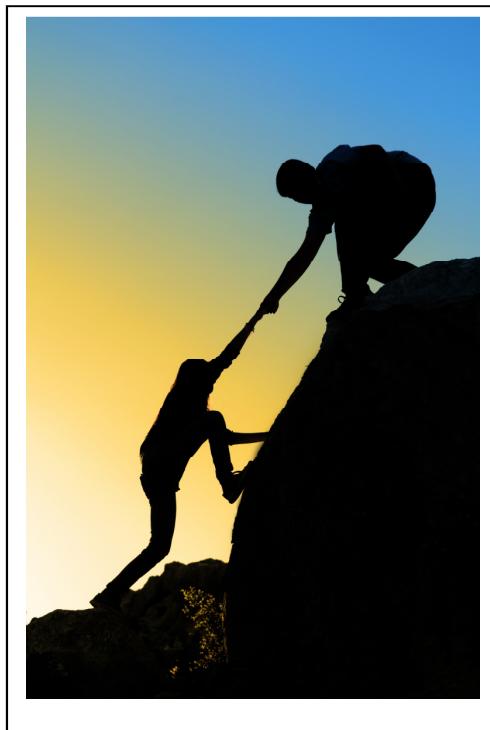


Image: canaran

I'll close by wishing you and your loved ones better health, good luck, good friends and a journey through illness that's as easy as possible.