



NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

**What is going on in my life and my caregiving journey?**

**If I had the time, what would I do for myself or my own well-being?**

**What are caregiving things I do that others could do or I could teach others to do?**

*(Note: you can expand on this brainstorming in the Integrated Support Star and Mapping Relationships tools)*



# LifeCourse Profile | Caregiver Well-Being

NAME: Name of person filling out the LifeCourse Profile.

DATE: Date filled out.

## What is going on in my life and my caregiving journey?

Think about times that you felt you were doing well - physically, mentally, and emotionally.

- What contributed to that well-being?
- What were you - or others - doing that helped to make you feel satisfied or comfortable?

This may include routines, habits, experiences, supports from others, and access to resources. Think about what has “worked” for you in the past to maintain your well-being.

## If I had the time, what would I do for myself or my own well-being?

What things, if any, do you want or need to do for yourself that you do not feel you can do right now? This could be simple things like activities you enjoy or complex things like life goals you want to pursue.

- What makes you “feel like you” that you would like to do more of?
- What are things you used to do or enjoy that you haven’t had the ability to do - or that have had to look different - since you began supporting your loved one?

## What are caregiving things I do that others could do or I could teach others to do?

- What does caring for or supporting your loved one look like in the day-to-day?
- What are the things that you take care of that someone (or something) else would need to do for you to feel able/comfortable to focus on your personal well-being?
- What would it take/what would it look like for someone (or something) else to do that?

*(Note: you can expand on this brainstorming in the Integrated Support Star and Mapping Relationships tools)*