

Case Study:

From Caregiver to Daughter: Rediscovering What Family Care Can Look Like



The Client

Helen spent her entire adult life in the house she and her husband renovated together. She raised her kids, taught high school, volunteered, and poured herself into her passions: painting, holiday celebrations, and her church community. She was a woman who knew her own mind. Until she didn't.

When her husband died, Helen's daughters realized how much he'd been quietly managing. Helen would stay up all night, "organizing" boxes in the dark garage. She'd throw out groceries right after they were bought.

She told the same stories again and again. (And again.) Her husband had been able to hide Helen's struggles, but now they were accelerating and something had to be done. But what? And who was going to do it?

Helen's two daughters saw the problem differently. Lizzy, who is practical, decisive, and (according to her sister) controlling, wanted to hire professional help immediately. Michelle, however, had been shouldering most of the caregiving herself. She knew her mother needed help, but she wasn't ready to stop being the one to provide it.

The Challenge

The family already employed a private caregiver who handled days, but nights were Michelle's domain. So when Lizzy pushed to bring in professional nighttime caregivers, Michelle pushed back. This was her role. The idea of strangers taking over felt like failure.

Then nights became more hazardous. Helen roamed the house, navigating dark stairs to the attic and staying awake for hours. Michelle was spending nearly every evening at her mother's, sacrificing her own life to keep Helen safe. She begrudgingly agreed to try professional caregiving help.

The family dynamics made the situation more challenging. Lizzy corrected everything their mother said, fixating on accuracy rather than connection. The daytime caregiver felt territorial. And Michelle herself was hesitant to work with us, uncertain whether to lean in or keep her distance.

The Solution

When our caregiver showed up that first night, Helen kicked her out as Michelle watched, conflicted—part of her wanted this to fail so she could prove she was irreplaceable. Part of her desperately needed it to work.

Helen is sleeping through the night in her own bed. That has changed everything.



Slowly, Michelle started to understand what good dementia care looks like. When Helen demanded that her caregivers leave, Michelle saw how they improvised by pretending to text someone for a ride. When the ride conveniently couldn't show up until morning, Helen's politeness meant she'd relent and even offer up a guest room. Another tactic was to enter through the garage to avoid the disruption of a new arrival, or play musicals to calm Helen down.

Michelle began to collaborate rather than compete, sharing insights about her mother's routines, triggers, and preferences. She came to understand that dementia isn't something to fix; it's something to work with.

The Outcome

Helen still repeats her stories and insists she doesn't need help. But she's sleeping through the night in her own bed instead of sorting through boxes in a dark attic. She has caregivers who've learned from Michelle exactly how to approach her, what calms her, and when to redirect her before she falls asleep on the couch.

The role Michelle fought so hard to protect transformed into something better when she was able to share it. Michelle now has the space to live her own life. She can focus on her career, enjoy evenings to herself, and show up for her mother as family instead of staff. She discovered that loving her mother doesn't mean losing herself.

Contact us for a free consultation today. We'll explain our one-on-one approach to dementia care, and how we can reconnect you with the person you love.

Call 847-407-1450 or visit www.fullbloommemorycare.com

