

Working with MS Support Group

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Rockville Nursing Home, 303 Adclare Road, Rockville, MD 20850

February 12, 2017

Agenda

3:00pm	Welcome!
	Brief Introductions/Member Check-in
3:10pm	Who's Taking Care of You? Taking Care of the Person with MS "There's little about modern society that prioritizes, encourages, or facilitates caring for yourself or treating yourself well." Julie Beck (Atlantic magazine; OCT 2, 2015) "Make yourself a priority in your life. After all, it's your life." — <u>Akiroq Brost</u>
4:00pm	Member Sharings & Support
5:00pm	Adjourn

Handouts & "News You Can Use":

Who's Taking Care of You Quiz (see page 2 of agenda) – this is a quiz I made-up as prompts for our discussion at our meeting today

You Feel Like Shit - An Interactive Self Care Guide

http://philome.la/jace_harr/you-feel-like-shit-an-interactive-self-care-guide/play

Perfect Potion Self Care Quiz

https://www.perfectpotion.com.au/news/general_news/self-care-quiz

What's Your Self Compassion Style from Psychology Today magazine

<https://www.psychologytoday.com/blog/living-the-questions/201405/quiz-whats-your-self-compassion-style>

Next/Upcoming Meetings:

March 12th – Meeting (Daylight Saving Time Begins - **Remember to set your clocks forward 1 hour Sat. night!**)

April 9th – Meeting

May 14th – **NO MEETING!**

May 21st – Meeting **RESCHEDULED! (As I will be on business travel the week before.)**

QUIZ: Who's taking care of you? (There are no "correct" answers!)

	Y	N
1. Does someone else in your life count on you to make at least one of their meals most days?		
2. Do you schedule time to exercise (e.g., play sport, work-out at gym, exercise class, walk or hike, etc.), and adhere to that schedule, at least 3 times per week?		
3. Do you work for pay more than 45 hours per week?		
4. Do you have a partner or friend(s) that you spend at least 2 full hours (total) with every week where you are both focused on that interaction/relationship?		
5. Do you spend 8 hours or more a week looking at a screen (TV, tablet, cell phone, computer, etc.) outside of work hours?		
6. Do you have one or more hobbies or passions that you spend at least 4 hours (total) engaged in every week?		
7. Do you spend 8 or more hours (total) per week providing care to someone else or multiple others (e.g., children, parent(s), other family member, ill friend)?		
8. Do you eat something nutritious (e.g., vegetables, whole grain foods, fruits) at least every 6 hours when you are awake?		
9. Do you drink <i>less than</i> 32 ounces (4 cups) of water (or non-sugar-sweetened and non-alcoholic liquid) per day?		
10. Do you usually take medications as prescribed and on time?		
11. Do you minimize your struggles, thinking other people have it much worse than you do?		
12. Do you get at least 7 hours of sleep per night?		
13. Do you struggle to find the time for health and dental care appointments?		
14. Are your daily surroundings and/or home comfortable (e.g., temperature, clean, safe, organized)?		
15. Do you often agree to do things for or with others that you later regret agreeing to?		
16. Do you ask for help when you need it?		
17. Do you put off routine personal "pampering" (e.g., haircut, mani-/pedicure, massage, etc.) due to time issues?		
18. Have you cultivated a personal support network of people you can call on in an "emergency?"		
19. Do you find it difficult to ask for time off or a break?		
20. Do you take at least 10 minutes every day for quiet reflection, meditation, centering, mindfulness, or any other time-out practice?		

Count how many green boxes you've checked.