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# The Family Care Conversation Guide

Navigating Difficult Discussions with Confidence

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**OURO**

Care coordination made simple.

**ourocare.com**

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WELCOME

# Some of the most important conversations in caring don't come with a script.

> **In short**
> This guide gives family carers practical, adaptable frameworks — not scripts — for the difficult conversations that come up during a caring journey: needing more help, driving, moving, money, siblings, doctors and more. It's for any family carer, and takes about 15–20 minutes to read.

Every family caring for someone they love will, at some point, face a conversation that feels difficult to start. About driving. About needing more help. About money, or moving house, or what happens next.

These conversations matter because they shape how care actually unfolds — not just the practical decisions, but the trust, dignity and closeness between the people involved. Handled well, they bring families closer together. Left too long, they tend to create the very stress and conflict everyone was hoping to avoid.

This guide has been created as part of OURO's commitment to providing practical, evidence-informed resources for families — regardless of whether they use our platform.

## How to use this guide

This is a guide of **frameworks, not scripts.** You know your family, your history and your relationships better than any guide ever could. Use the language here as a starting point, then adapt it to how you actually speak with each other.

You don't need to read this cover to cover. Jump straight to the conversation you're facing, borrow a phrase from the Conversation Starters page, and come back to the rest when you need it.

**OURO MICRO-TIP**
*Some conversations happen over weeks, not one afternoon. Progress counts, even in small steps.*

GETTING STARTED

# Before Any Difficult Conversation

A few minutes of preparation can change the whole tone of a conversation. You're not trying to control the outcome — just to give the conversation the best possible chance of going well.

## Choose the right time

Avoid raising serious topics when someone is tired, unwell, distracted or in front of a crowd. A calm, unhurried moment works far better than a "good moment" that's really just convenient for you.

## Choose the right place

Private, familiar and comfortable beats formal. A kitchen table often works better than a clinic waiting room.

## Know your goal

Are you starting a conversation, or trying to finish one? Most difficult topics need several conversations — know which one this is.

## Listen first

Ask what they think and feel before sharing your own view. People are far more open to a conversation once they feel heard.

## Avoid solving everything at once

One topic, one conversation. Bundling several concerns together can make the whole exchange feel like an ambush.

## Write down your key points

Two or three points, kept simple, are easier to say — and easier to hear — than a long list of concerns.

### Conversation Preparation Checklist

- ☐ I've chosen a calm, private time — not a rushed or public moment
- ☐ I know my one main goal for this conversation
- ☐ I've written down my two or three key points
- ☐ I'm ready to listen, not just to speak
- ☐ I'm prepared for this to take more than one conversation

CONVERSATION GUIDE 1 OF 6

# When a Loved One Needs More Help

"I'm managing fine" is one of the most common — and most complicated — sentences in caring. It can be true, partly true, or a way of protecting independence and pride.

## Respecting independence while expressing concern

Most people don't resist help itself — they resist the feeling of losing control over their own life. The goal isn't to convince someone they need help. It's to open a conversation they feel part of, not one done to them.

- Lead with observation, not judgement: describe what you've noticed, not what you've concluded.
- Ask before you offer: "How are you finding things at the moment?" invites more honesty than "You need help."
- Offer choices, not decisions: "Would a cleaner or some meal help be more useful?" keeps control with them.

"I've noticed a few things lately that made me want to check in — how are you really finding things?"

## Avoiding confrontation

If the conversation becomes tense, it's usually a sign to slow down rather than push harder. A calm "let's talk about this again soon" often achieves more than trying to resolve everything in one sitting.

> **Starting small**
>
> You don't need to raise every concern at once. Often, offering one small piece of practical help — a grocery run, a lift to an appointment — opens the door to a bigger conversation later, once trust has been built.

## Conversation examples

**TRY SAYING**

*"I love visiting and just want to make sure you've got everything you need — is there anything that's become harder lately?"*

**INSTEAD OF**

*"You clearly can't manage the house anymore, we need to sort this out."*

## Common mistakes to avoid

- Raising it during a crisis, when emotions are already high on both sides.
- Comparing them to other people's parents or in-laws.
- Making promises about the future you can't be sure you'll keep.
- Treating one difficult moment as proof of a bigger decline.

## Ending the conversation well

Even if nothing is resolved, a good ending matters. Thank them for talking with you, agree on one small next step if possible, and confirm you'll check in again. Small, repeated conversations build trust far more effectively than one long, decisive talk.

**OURO MICRO-TIP**

*Silence is often part of a difficult conversation. Don't rush to fill it — give the other person room to think.*

CONVERSATION GUIDE 2 OF 6

# Driving, Safety & Independence

Few conversations are more emotionally loaded than driving. For many people, the car represents freedom, identity and self-reliance — losing it can feel like losing far more than transport.

## Acknowledge what's really being lost

Before talking about safety, acknowledge the independence at stake. "I know how much driving means to you" said sincerely can lower defensiveness before the harder part of the conversation begins.

## Focus on safety, not age

Age alone doesn't determine driving ability. Keep the conversation about specific, observed safety concerns — near misses, new dents, getting lost on familiar routes — rather than general assumptions.

> **A gentler way in**
>
> Rather than opening with the topic directly, some families find it easier to start with, "Can I come along for a drive with you sometime soon?" This turns a confrontation into a shared moment of honesty.

## If the conversation stalls

It's common for this topic to need more than one attempt. A GP or occupational therapist can sometimes act as a neutral, trusted voice if a family conversation alone isn't landing.

## Discussing alternatives before the decision, not after

Bring solutions into the conversation early, so giving up driving isn't a loss with nothing on the other side of it:

- Community transport and subsidised taxi schemes for older Australians
- A shared family roster for regular trips (medical, social, shopping)
- Rideshare apps set up in advance, with payment sorted so it feels simple

## Managing strong emotions

Anger, denial or tears are common responses — they don't mean the conversation has failed. Stay calm, avoid arguing the point further in the moment, and return to it when things have settled.

## Sample wording

TRY SAYING

*"I'm not trying to take your independence away — I want to help you stay independent safely, and that might mean getting around a different way."*

Safety conversations go further when independence is part of the plan, not just the problem.

CONVERSATION GUIDE 3 OF 6

# Talking with Brothers, Sisters & Family Members

Caring responsibilities rarely divide themselves evenly — geography, work, health and old family roles all play a part. Left unspoken, this imbalance is one of the most common sources of resentment between siblings.

## Naming the imbalance without blame

Most resentment grows in silence. Naming the situation factually — "I'm doing the weekday visits and appointments, and I'm finding that hard to keep up" — opens the door to a practical conversation rather than an emotional standoff.

## How to ask for help clearly

Vague requests ("I could use more support") are easy to overlook. Specific requests are far more likely to lead to action:

- "Could you take Dad to his Tuesday appointments each fortnight?"
- "Would you manage the bills and paperwork? I'll handle the day-to-day visits."
- "Can we split the weekend calls between the three of us?"

> Sharing the load isn't about splitting things equally — it's about splitting them fairly.

## Handling "I'm too busy"

This response often reflects genuine constraints — distance, work, young children, health — rather than a lack of care. Try separating willingness from capacity: "I understand you can't be here in person. Is there another way you could take something off my plate — calls, paperwork, or costs?"

## Assigning tasks, not just intentions

General agreements ("we'll all help out") tend to quietly default back to one person. Specific, named tasks with a rough schedule hold up much better over time.

### A simple family meeting template

- **1. Check in** — how is [name] doing, and how is everyone coping?
- **2. List tasks** — medical, financial, household, social
- **3. Assign owners** — who does what, and how often
- **4. Agree next check-in** — set a date, even roughly

**OURO MICRO-TIP**

*Keep family meetings focused on the person receiving care — it helps de-personalise disagreements between siblings.*

CONVERSATION GUIDE 4 OF 6

# Talking with Doctors & Professionals

Medical appointments move quickly, and it's easy to leave with more questions than answers. A little structure helps you get the most from every visit.

## Questions worth asking

- What does this diagnosis or result mean day-to-day?
- What changes should we watch for at home?
- What are the options, and what would you recommend?
- Who do we contact if things change quickly?

## Note-taking tips

Bring a notebook or phone. Write down names of medications, dosages and any follow-up actions — it's easy to forget details once you're back in the car.

## Clarifying what you've heard

It's always reasonable to ask a clinician to slow down or explain something differently. Try: "Can I just repeat that back to make sure I've understood?"

## Advocating respectfully

If something doesn't feel right, it's okay to ask for a second opinion or more time. Most clinicians welcome informed, engaged family members.

## After the appointment

Share a short summary with other family members involved in care, so everyone is working from the same information.

You don't need to know the answers — you just need to ask good questions.

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# When Conversations Become Emotional

Anger, grief, guilt, denial and fear are a natural part of care conversations — for the person receiving care, and for you. Emotion isn't a sign the conversation has gone wrong.

## In the moment

- **Pause, don't push.** "Let's take a breath and come back to this" is often more productive than continuing.
- **Acknowledge the feeling.** "I can see this is really upsetting" costs nothing and de-escalates a lot.
- **Avoid arguing facts mid-emotion.** Logic rarely lands when someone is upset — return to it later, calmly.
- **Return later.** Most difficult topics can wait a day. Few need resolving in a single sitting.

> **What to say when emotions rise**
> "I'm not trying to upset you — I care about you, and that's why I'm bringing this up. We don't have to sort it all out right now."

## Looking after yourself, too

These conversations can be draining for carers as well. If you're finding conversations consistently distressing, it's worth talking to your GP or a counsellor, or reaching out to a carer support service for guidance.

CONVERSATION GUIDE 6 OF 6 · QUICK REFERENCE

# 20 Conversation Starters Most Families Need

A printable reference for the moment you need the right opening line. Adapt the wording to sound like you.

## Starting the conversation

- "Can we talk about something that's been on my mind?"
- "I'm bringing this up because I care about you."
- "There's no rush — I just wanted to start talking about this."

## Asking about support

- "How are you finding things at the moment, honestly?"
- "What would make daily life feel a bit easier?"
- "What would make you feel more comfortable?"

## Discussing safety

- "I noticed [specific thing] — can we talk about it?"
- "What would help you feel safer at home?"
- "Can I come along with you next time, just to see?"

## Involving siblings

- "Can the three of us find a time to talk this week?"
- "I've been doing X — could you take on Y?"
- "I don't want this to fall on one person."

## Speaking with doctors

- "Can you explain that in a bit more everyday language?"
- "What should we be watching for at home?"
- "Who should we call if things change?"

## Planning ahead

- "Can we talk about what you'd want, before we need to?"
- "There's no wrong time to start planning this."
- "I want to understand your wishes, not just decide for you."
- "Would it help to write some of this down together?"
- "What matters most to you as we plan ahead?"

SUMMARY

# Ten Key Communication Principles

**01 Start early**
Conversations are easier before a crisis forces them.

**02 Speak with empathy**
Lead with care, not with the problem.

**03 Listen before you speak**
Understand their view before sharing yours.

**04 Focus on the person, not the problem**
Keep dignity and identity at the centre.

**05 Choose your moment**
Timing and setting shape how a conversation lands.

**06 Aim for progress, not perfection**
A conversation that opens the door is a success.

**07 One topic at a time**
Bundling concerns overwhelms and derails.

**08 Offer choices, not decisions**
Involvement preserves independence.

**09 Revisit important conversations**
Most things are agreed over several talks, not one.

**10 Share responsibility**
Conversations — and care — go better shared.

There is no perfect conversation. There is only the next honest one.

FAQ

# Frequently Asked Questions

### What if they refuse to talk about it at all?

Don't force a single conversation to carry the whole topic. Mention it briefly, let it sit, and return to it another day. Repeated small openings tend to work better than one determined attempt.

### What if my siblings just won't engage?

Ask for something specific and small rather than general involvement — a single task is easier to say yes to than "helping out more." If there's still no response, it's reasonable to seek outside support rather than carrying everything alone.

### Is it okay to involve a professional in a family conversation?

Yes. A GP, social worker, or care coordinator can sometimes raise a sensitive topic more neutrally than a family member — particularly around driving, safety or moving into care.

### What if the conversation ends badly?

One difficult exchange doesn't undo the relationship. Where possible, follow up warmly afterwards, separate from the topic itself, so the conversation doesn't become the last word between you.

### Does this guide apply to any specific condition or diagnosis?

No — the frameworks here are general communication guidance for family caring conversations. They aren't tailored to any particular medical condition, and they aren't a substitute for advice from a health professional familiar with your situation.

### Where can I get more support if conversations keep breaking down?

Carer Gateway offers free counselling and coaching for carers, and Relationships Australia provides family dispute resolution services. See Further Support & Resources on the next page.

RESOURCES

# Further Support & Resources

You don't have to navigate these conversations alone. These trusted Australian organisations offer information, counselling and practical support for carers and families.

**Carers Australia**
The national peak body for carers, offering information, advocacy and links to state and territory carer services.
**carersaustralia.com.au**

**Carer Gateway**
Australian Government service providing free counselling, coaching, peer support and practical services for carers.
**carergateway.gov.au**

**My Aged Care**
The government's central starting point for aged care information, assessments and service access.
**myagedcare.gov.au**

**Dementia Australia**
Information, education and a National Dementia Helpline for families supporting someone living with dementia.
**dementia.org.au**

**Beyond Blue**
Mental health information and support, including resources specifically for carers experiencing stress or burnout.
**beyondblue.org.au**

**Relationships Australia**
Counselling and family dispute resolution services for families navigating difficult conversations and decisions.
**relationships.org.au**

## Worth keeping handy

Many families save this page, or print it and keep it on the fridge alongside the Conversation Starters on page 13 — so the right number is never far away when it's needed.

IMPORTANT INFORMATION

# Disclaimer & Sources

## Disclaimer

This resource provides general information only and is intended to support families and carers in navigating care conversations. It is not a substitute for medical, legal, financial or other professional advice. It is not specific to any diagnosis, condition or individual circumstance. Services, organisations and contact details can change — always confirm current information with the relevant service provider or qualified professional.

## Sources

This guide draws on general good-practice communication guidance published by the following Australian carer support and family-services organisations, alongside the practical, on-the-ground experience of families navigating care. It does not cite specific studies or statistics.

**Carers Australia** — general resources and guidance for family and kinship carers. carersaustralia.com.au

**Carer Gateway (Australian Government, Department of Social Services)** — practical guidance and support services for carers. carergateway.gov.au

**Dementia Australia** — communication guidance for families supporting someone living with dementia. dementia.org.au

**Beyond Blue** — general mental health and carer wellbeing information. beyondblue.org.au

**Relationships Australia** — general guidance on family communication and conflict resolution. relationships.org.au



ABOUT OURO

# Care coordination made simple.

OURO is building a simpler way for families to coordinate care.

When someone needs ongoing care or support, the challenge is often not just the care itself. It is keeping track of information, appointments, responsibilities, people, decisions and the many small tasks that fall between the cracks.

OURO is designed to help families bring those moving parts together in one place, making it easier to understand what is happening, share responsibility and stay coordinated.

Our resources are created to provide practical, accessible information for families and carers navigating care.

**Learn more:** ourocare.com

OURO is currently developing its platform with families and carers. If you would like to learn more about the Private Beta, visit **ourocare.com**.