

You don't have to do everything. You have to do five things well.

A starting point for the people who want to help, written by someone who has been the caregiver for decades.

"When my mother was first diagnosed with melanoma decades ago, I was still a child. I knelt by her bed every day for six months and helped change the dressings on the wound where they had cut the cancer from her back. I did not know what an inflammatory response was. I did not know what apoptosis meant. I knew only that my mother was hurting, and I was not going to look away." — Sonja Galani

FIVE THINGS YOU CAN DO THIS WEEK

1 Become the keeper of the binder

Buy a 1.5-inch three-ring binder. Make sections for: Diagnosis & staging • Current medications • Lab results • Imaging reports • Appointment notes • Insurance • Financial assistance. Bring it to every appointment. The binder is your job. The patient already has too many.

2 Take notes during every appointment

Patients in oncology appointments hear roughly 50% of what is said — that's not a personal failing, it's a documented stress response to medical conversations. Your job is to be the second pair of ears. Write down what was said. Repeat it back at the end. Walk out with a written summary, even if you wrote it yourself.

3 Cook one anti-inflammatory meal a week

Not every meal. One. Make it big enough for leftovers. The simplest version: a sheet pan of cruciferous vegetables (broccoli, cauliflower) and salmon, drizzled with olive oil, with a side of cooked grains. That single meal, made consistently, is more impactful than any supplement on the shelf.

4 Protect their sleep

Field the calls after 8 PM. Move late visits to morning. Make the bedroom cool, dark, and quiet (65–68°F). Buy blackout curtains. Move screens out of the bedroom. Sleep is treatment. You are protecting an immune system that needs the rest more than it needs another well-meaning visitor.

5 Sit with them. Don't fix. Don't fill the silence.

The hardest skill, and the most important. People in cancer treatment are surrounded by interventions — by people doing things to them and for them. Sometimes the most healing thing in the room is someone who simply stays, who does not need them to feel better, and who is not afraid of how hard this is.

IF YOU ARE CAREGIVING FOR SOMEONE WHO DOES NOT SPEAK ENGLISH FLUENTLY

My mother is German. She came to the United States carrying a vocabulary that did not always have a word for what the doctors were telling her. I became her translator while still a child, before I even understood the medicine I was translating. If you are doing this for a parent — if you are the bridge between their language and the language of oncology — this section is for you.

What you are actually doing: You are not just translating words. You are translating concepts that sometimes do not exist in their first language, in a system whose assumptions are foreign, during the most frightening conversations of their life. The cognitive load is enormous. Acknowledge it. You are doing two jobs at once: the caregiver's job, and the interpreter's job. They are equally exhausting and they are not the same job.

Practical Strategies

- **Ask for a hospital interpreter at every appointment.** Federal law (Title VI of the Civil Rights Act) requires hospitals receiving federal funds to provide free interpreters. Ask in advance. Insist if they hesitate. You being there does not mean they don't need a professional interpreter — you should be present and the interpreter should be present.
- **Translate the diagnosis into their language, in writing, with the help of a doctor.** Get the exact name of what they have, stage, remission, immunoglobulin, chemotherapy. They need to know the actual name of what they have.
- **Build a glossary.** Keep a running list in their first language of the medical terms that come up: tumor marker, biopsy, stage, remission, immunoglobulin, chemotherapy. They will hear these words again and again. Make sure they have a stable understanding of what each one means.
- **Watch for the moment they nod when they don't understand.** Patients across cultures and languages do this — they nod to be polite even when they're lost. Be the person who pauses the conversation and says "Wait. Let me make sure we both understood that."
- **Get pamphlets in their first language.** Major cancer centers (NCI, ACS, MD Anderson) have material in dozens of languages. Print them. Read them together.
- **Document the conversation in their language.** After every appointment, write a one-paragraph summary in their first language so they can re-read it on their own time.
- **Protect them from medical decisions made in fast English.** Pharmacies, insurance phone trees, treatment-consent forms. These are where errors compound. Be the voice on those calls.

A note on guilt: *If you are caregiving for an immigrant parent, you are likely also carrying a particular kind of guilt — the feeling that they sacrificed something to bring you here, and that whatever you do for them now is not enough. Hold this gently. You are not going to be enough. No caregiver is. Their illness is not your debt to repay. It is something you are walking through together.*

Things That Are Your Job	Things That Are NOT Your Job
<ul style="list-style-type: none">• Keeping the binder organized• Taking notes during appointments• Protecting their sleep window• Cooking one anti-inflammatory meal a week• Being present in the room	<ul style="list-style-type: none">• Curing them• Always knowing the right thing to say• Being cheerful in front of them every day• Reading every cancer book on Amazon• Solving the financial side alone

Take Care of Yourself: A caregiver who collapses is no use to anyone. Keep your own appointments. Keep your own friends. Keep one part of your life that is not about cancer. The four pillars in this protocol — sleep, movement, nutrition, supplementation — apply to you too. You are not exempt because you are not the patient. You are running a marathon next to one. Pace accordingly.

*This tool is part of the **Breathe & Bloom Caregiver Companion Workbook**. Download the full 90-page workbook at breatheandbloom.org*