

National Council for the Elderly



FACT SHEET No. 1

CARING FOR THE ELDERLY AT HOME

PREPARED FOR THE NATIONAL COUNCIL FOR THE ELDERLY BY
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TO ASSIST THOSE WITH A RESPONSIBILITY FOR THE WELFARE OF THE
ELDERLY AND THEIR CARERS
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There is a group of people whose existence until recently has barely been acknowledged by policy-makers and planners. However, in view of the increasing numbers of elderly people, particularly those surviving to a greater old age, and because of government commitment to the expansion of community care policies, the carers of the elderly living at home can no longer be ignored.

There have always been carers, but their numbers are increasing as the numbers of elderly people requiring care increase. For example, in Britain there are now more women caring for elderly or disabled relatives than those caring for children under 16 - scarcely credible, but true. The trend in Ireland is moving in this direction too, as families are getting smaller and the number of elderly people in the population increases.

WHAT CAN YOU DO?

As a statutory worker, a member of a voluntary body or a concerned individual with an interest in or a responsibility for the welfare of the elderly, it is increasingly likely that you will encounter family carers of elderly people in the course of your work. Therefore, it is important that, working as a member of the community care team and/or voluntary body, you try to alleviate as much of the burden facing carers as possible by developing with others a network of support for them.

Carers may require services which you alone have not the expertise to provide. In such cases, you can put the carer in touch with the appropriate member of the community care team: a doctor, social worker, or public health nurse, for example.

You may be able to help the carer by providing him/her with information on benefits or entitlements available to carers or to elderly people. One such example is the Carer's Allowance. This Allowance has limited application, however, and you may have to explore other possibilities. This Fact Sheet may help you identify other ways in which you can be of greater assistance to carers of elderly people living at home.

WHO ARE THE CARERS?

- **Women** - there are four times as many female carers as male.
- **Aged between 40 and 60 years** - however, it is useful to note that as many as one-third are themselves elderly.
- **Married or have been married.**
- **Not in paid employment** - one-fifth will have given up work to care for the elderly person.
- **One-third are members of households totally dependent on state benefits.**
- **Have not got good health** - the majority of carers will have had occasion to visit the doctor about their own health in the last year. One-third will be suffering from on-going health problems.
- **Have been caring for five years or more** - 40% having been caring for more than 10 years.
- **Caring for a parent or parent-in-law** - although one-quarter care for their spouse.
- **Caring with few supports from either statutory or voluntary services.**

FOR WHOM DO THEY CARE?

The elderly persons being cared for are best described as follows:

- **Approximately 60% female.**
- **Have some physical problems, typically of long-term duration (5 years or more)** - disease of the joints is a very common complaint.

- **Depend on others for the essentials of cooking and preparing meals.**
- **Over a quarter are dependent with regard to bathing - a further 52% require help with this task.**
- **31% are housebound, 15% are bed-ridden.**
- **Memory loss, angry outbursts, mood swings, confusion, depression, and sleeplessness each strike 15% of elderly people cared for on a regular basis, 24% suffer from these symptoms occasionally.**
- **24% are incontinent of urine, and many have problems with soiling.**

WHAT WORK DO CARERS DO?

- **50% of carers devote 4-7 hours a day caring for the elderly person; 35% spend more time than this.**
- **53% are required to be "on call" 24 hours a day always or almost always.**
- **Over half of carers help the elderly person in and out of bed on a daily basis; 32% do so less regularly.**
- **81% have responsibility for the administration and supervision of the elderly person's medication.**
- **91% prepare meals for the elderly person.**
- **65% give some help with washing and bathing the elderly person.**
- **25% dress the elderly person daily; 30% do so on a less regular basis.**

- Tasks relating to toileting are carried out daily by **22%** of carers, and this work is carried out on a less regular basis by a further **22%**.

WHAT RESTRICTIONS DOES CARING IMPOSE?

- **Financial strain** - 35% of carers experience financial strain all or some of the time as a result of loss of income in giving up work and the extra costs incurred through caring.
- **Restrictions on free time** - through being confined during the day and/or evening time. 71% of carers feel confined all or some of the time.
- **Reduced opportunities for, and lower levels of, participation in social activities.** 58% of carers believe caring places constraints on their social life.
- **Changes to personal plans** - for example: holidays, planned outings, work adjustments.
- **Not being able to relax when out** - through worry about the elderly person, or because of being limited to time when out.
- **Physical strain** - the majority of carers say they find it very tiring; 57% feel overwhelmed by caring some or all of the time.
- **Emotional strain** - carers find it upsetting seeing the elderly person grow old and changing from his/her former self.
- **Strains on relationships** - with other family members - for example: spouse or children demanding attention, or with those whom the carer feels are not doing enough to help in the caring process.

WHAT ARE THE CARER'S NEEDS?

- **Social support.**
- **Financial help.**
- **Information and advice** on how to cope with both the physical and mental disabilities of old age.
- **Respite care** - either at home or in residential homes - to enable the carer to get a break; 82% have not had a holiday in the past year.
- **Provision of aids and adaptations** - such as commodes and wheelchairs - to make caring easier.
- **Practical help and training** with difficult tasks such as lifting and bathing.
- **Regular access to the back-up services** provided by public health nurses, home helps and social workers. This is particularly the case for those, without medical cards, who cannot afford the additional help they need.
- **Moral support and counselling services.**
- **Proper and appropriate housing conditions.** Stairs are a problem for almost one-third of those caring. 16% still lack the basic necessity of an indoor toilet. If carers are to carry out their task properly, homes must be appropriately equipped.
- **A sitting service** to provide respite from time to time.

HELPING THE CARER AND YOURSELF ASSESS NEEDS

The following check-list is provided in order to *assist you in assessing the areas in which the carer may need help with the elderly person.* It is also useful as a measure of physical dependency of the elderly person.

NON-PERSONAL

THE ELDERLY PERSON:

CAN USE THE TELEPHONE

- Without help, including looking-up numbers and dialling.
- With some help. (Can answer phone or dial operator in an emergency but needs a special phone, or help in dialling numbers in full.)
- Completely unable to use the telephone.

CAN GET TO PLACES BEYOND WALKING DISTANCE

- Without help. (Travel alone on buses, taxis, drive etc.)

With some help. (Needs someone to go with him/her.)

Unable to travel unless special vehicle, such as ambulance, used.

**CAN GO SHOPPING FOR GROCERIES OR CLOTHES
(assuming transport available)**

Without help.

With some help. (Needs someone to go on shopping trips with him/her.)

Completely unable to shop.

CAN PREPARE OWN MEALS

Without help. (Plan and cook full meals independently.)

With some help. (Can prepare some things but unable to prepare any meals.)

Completely unable to prepare meals.

CAN DO HOUSEWORK

Without help. (Can scrub floors, etc.)

With some help. (Can do light housework, but needs help with heavy work.)

Completely unable to do any housework.

CAN TAKE OWN MEDICINE

Without help. (In the right doses, at the right time.)

With some help. (Able to take medicine if someone prepares it, and/or reminds him/her to take it.)

Completely unable to take medicine.

CAN HANDLE OWN MONEY

Without help. (Writes cheques, pays bills, etc.)

With some help. (Manage day-to-day buying, but needs help with managing cheque book and paying bills.)

Completely unable to handle money.

CAN WASH AND DRY OWN CLOTHES

Without help.

With some help.

Completely unable to wash/dry own clothes.

If help needed in any of these categories, is there always someone there to provide that help?

YES

NO

If 'NO', what help is not available?

PERSONAL

THE ELDERLY PERSON:

CAN FEED HIM/HERSELF

- Without help. (Able to feed self completely.)
- With some help. (Needs help with cutting food, etc.)
- Completely unable to feed self.

CAN DRESS AND UNDESS SELF

- Without help. (Able to pick out clothes, etc.)
- With some help.
- Completely unable to dress and undress self.

CAN TAKE CARE OF OWN APPEARANCE

For example: combing hair and (for men) shaving

- Without help.
- With some help.

Completely unable to maintain appearance.

CAN WALK

Without help. (Except with a cane.)

With some help from a person, or with the use of a walker, crutches, etc.

Completely unable to walk. (Includes: confined to wheelchair.)

CAN GET IN AND OUT OF BED

Without any help or aids.

With some help. (Either from a person or with the aid of some device.)

Totally dependent on someone else to lift him/her.

CAN TAKE A BATH OR SHOWER

Without help.

With some help. (Needs help getting in and out of bath/shower, or needs special attachment on the bath/shower.)

Completely unable to bath self.

TROUBLE GETTING TO THE BATHROOM ON TIME?

No

Yes

If 'YES', how often does he/she wet or soil self (either day or night)?

Once or twice a week.

Three times a week, or more.

If needs help in any of the personal care categories listed above, is there always someone available to provide that help?

Yes

No

If 'NO' what help is not available?

What did the carer and you discover?

Has the carer made any plans to make life more manageable for him/herself?

It is important that, when the degree of dependency of the elderly person is assessed, the carer should be helped to decide whether he/she is carrying a burden beyond his/her physical and mental ability, and to identify what services would be of most assistance to him/her.

Carers should be encouraged to seek help from the general practitioner, public health nurse, occupational therapist, physiotherapist, social worker, home help, and other sources of help when possible, **if they are available.**

DIFFERENT NEEDS IDENTIFIED

There are those elderly who are quite strong physically, but mentally are incapable of even the simplest action. Such elderly people pose other problems for the carers and, because of wandering or disorientation, carers may find that it is impossible to leave the elderly person alone, and that his/her lifestyle is severely restricted as a result.

An elderly person suffering from severe dementia or Alzheimer's Disease may be totally incapable of caring for him/herself. If there are any such indications, you may wish to advise the carer to get in contact with a specialist (through his/her GP) or, where appropriate, with the Alzheimer Society of Ireland (see below). It is important, however, not to confuse this very serious disorder with the general forgetfulness and confusion that many elderly people experience from time to time.

The following is a check-list of memory and behaviour problems, again designed to help you discover the level of dependency of the elderly person and the appropriate help which can be given to the carer to alleviate some of the burden.

MEMORY

- No memory defect.
- Occasionally forgetful, but normally remembers recent events.
- Short-term loss of memory; little memory of recent events.

ORIENTATION

- No evident difficulties in finding way about home.
- Sometimes mistakes surroundings, sometimes can find way around home.
- Unable to find way around, but is aware that he/she is at home.
- Completely disorientated: has no idea where he/she is.

AWARENESS

- Normally fully aware of what goes on around him/her.
- Sometimes aware of what goes on around him/her.

- Normally unaware of what goes on around him/her.
- Completely unaware: has no idea of what goes on around him/her.

COMPREHENSION

- Able to follow and understand everyday conversation without undue difficulty.
- Only able to understand short, simple phrases.
- Apparently unable to make sense of verbal communication.

BEHAVIOUR

- Observes accepted social standards and is generally co-operative.
- Behaves passively; is not actively unco-operative.
- Sometimes behaves oddly or has to be persuaded to co-operate.
- Is sometimes actively unco-operative, or sometimes distresses or offends others.

Is regularly disruptive and unco-operative.

WANDERING

No aimless wandering.

Occasional and brief bouts of aimless wandering.

Persistent aimless wandering by day **or** by night.

Persistent aimless wandering by day **and** night.

What did the carer and you discover?

Has the carer made any plans to make life more manageable for him/herself?

USEFUL ADDRESSES

The National Council for the Elderly, Corrigan House, Fenian St., Dublin 2. Telephone: (01) 6766484/5. The National Council for the Elderly is an advisory body to the Minister for Health on matters concerning the elderly.

The Carers' Association, St. Mary's Community Centre, Richmond Hill, Dublin 6. Telephone: (01) 4974498. The Carers' Association provides support and information for carers all over Ireland.

The Alzheimer Society of Ireland, St. John of God Hospital, Stillorgan, Co. Dublin. Telephone: (01) 2881282. The Alzheimer Society of Ireland provides a range of support services for carers of the elderly mentally infirm all over Ireland.

Friends of the Elderly, 25 Bolton Street, Dublin 1. Telephone: (01) 8731855. Friends of the Elderly provides a social contact support service for elderly people in the Dublin area.

National Social Service Board, 71 Lr. Leeson Street, Dublin 2. Telephone: (01) 6616422. The National Social Service Board publishes *Entitlements for the Over 60s* and supports over 80 Citizen Information Centres throughout Ireland.

Pension Services Office, College Road, Sligo. Telephone: (01) 8748444 or 071-69800. Applications for a *Carer's Allowance* should be sent to the Pension Services Office.

EASTERN HEALTH BOARD

Dun Laoghaire: Tivoli Road, Dun Laoghaire. Tel: 2843579.

Dublin South East: Vergemount Hall, Clonskeagh, Dublin 6. Tel. 2698222.

Dublin South Central: Carnegie Buildings, 21/25 Lord Edward St., Dublin 2. Tel. 6792611.

Dublin South West: 57 Old County Road, Crumlin, Dublin 12. Tel. 4542511.

Dublin West: The Lodge, Cherry Orchard Hospital, Ballyfermot, Dublin 10. Tel. 6268101.

Dublin North West: Rathdown Road, Upr Grangegorman, Dublin 7. Tel. 8680444.

Dublin North Central: Aras Daimhin, Jones's Road, Dublin 3. Tel. 8731777.

Dublin North: Cromcastle Road, Coolock, Dublin 5. Tel. 8476122.

Kildare: Poplar House, Poplar Square, Naas. Tel. (045) 76001.

Wicklow: Glenside Road, Wicklow. Tel. (0404) 68400.

MIDLAND HEALTH BOARD

Laois: Health Centre, Portlaoise, Co. Laois. Tel. (0502) 21135.

Offaly: Health Centre, Arden Road, Tullamore, Co. Offaly. Tel. (0506) 41301.

Longford: County Clinic, Longford, Co. Longford. Tel. (043) 46211.

Westmeath: Health Centre, Mullingar, Co. Westmeath. Tel. (044) 40221.

MID-WESTERN HEALTH BOARD

Limerick: 31/33 Catherine Street, Limerick. Tel. (061) 316655.

Tipperary North: Kenyon Street, Nenagh, Co. Tipperary.
Tel. (067) 31212, 31229, 31379.

Clare: County Clinic, Bindon Street, Ennis, Co. Clare.
Tel. (065) 28525.

NORTH EASTERN HEALTH BOARD

Meath: County Clinic, Navan, Co Meath. Tel. (046) 21595.

Louth: Community Care Centre, Dublin Road, Dundalk,
Co. Louth. Tel. (042) 32287.

Cavan: Lisdarn, Cavan. Tel. (049) 61822.

Monaghan: Roosky, Co. Monaghan. Tel. (047) 81333.

NORTH WESTERN HEALTH BOARD

Sligo: Health Centre, Cleeveragh Road, Sligo and
Markievicz House, Sligo. Tel. (071) 60222 (both).

Leitrim: Community Care Offices, Leitrim Road,
Carrick-on-Shannon, Co. Leitrim. Tel. (078) 20308.

Donegal: Isaac Butt Building, Ballybofey, Co. Donegal.
Tel. (074) 31391/6.

SOUTH EASTERN HEALTH BOARD

Carlow: Dublin Road, Carlow. Tel. (0503) 31804, 31691.

Kilkenny: County Clinic, James' Green, Kilkenny.
Tel. (056) 21208, 52208.

Tipperary South: County Clinic, Western Road, Clonmel,
Co. Tipperary. Tel. (052) 22011.

Waterford: S.E.H.B. Offices, 32 The Mall, Waterford.
Tel. (051) 76111.

Wexford: County Clinic, Grogan's Road, Wexford.
Tel. (053) 23522.

SOUTHERN HEALTH BOARD

Cork: Abbeycourt House, George's Quay, Cork. Tel. (021) 965511.

Mallow: Gould's Hill House, Mallow, Co. Cork.
Tel. (022) 22220.

West Cork: Community Care Centre, Skibbereen, Co. Cork.
Tel. (028) 21722.

Kerry: 19 Denny Street, Tralee, Co. Kerry. Tel. (066) 21566.

WESTERN HEALTH BOARD

Galway: Community Care Offices, Newcastle Road, Galway.
Tel. (091) 23122, 23115.

Mayo: County Clinic, Castlebar, Co. Mayo. Tel. (094) 22333.

Roscommon: Community Care Offices, Roscommon.
Tel. (0903) 26518, 26604, 26665.

HOW YOU CAN HELP

- By encouraging other extended family members to contribute to some of the caring for the elderly person, to alleviate some of the burden on the carer.
- By putting the carer in contact with appropriate services and organisations, both professional and voluntary, that can be of help to them.
- By organising, with others, practical help for the carer in the form of trained volunteers who would give him/her relief for a few hours occasionally, or day/weekend relief.
- By helping to set up a support group for carers in your local area.
- By enabling the carer to develop a positive approach to him/herself.
- By enabling the carer to realise his/her potential in other areas of life.
- In summary, by caring for the *carer* as well as for the elderly person.

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