



Effective Interventions for Family Carers – The Evidence

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- This presentation will:
 - Summarise current state funded supports to Family Carers
 - Present the evidence on health impact and take up of services
 - Present the evidence about what interventions seem to make a difference to Family Carers

The Context

- ❑ In the region of 55,000 Full time Family carers receiving some financial support for their caring role (c 45,000 receive weekly payment = Carers Allowance, Carers Benefit, ½ rate CA/CB,
- ❑ c 55,000 more receive Annual Payment - Respite Care Grant –
- ❑ Total direct financial support estimated to be in the region of €580m p.a (but some would be paid through other SW payments anyway irrespective of care status – eg OAP)
- ❑ Value of care provided estimated to be in the region of €3b p.a

The Context (2)

- Large number of NGO's (and Care Alliance Members) currently offering
 - Carer Support Groups
 - Phone Line Support
 - 1-2-1 Case Work/Support (Drop In/Outreach)
 - Counselling, Respite
 - Training (significant expansion in 2009 onwards)

The Context (3)

- Unprecedented levels of State funded Home Care Support –
 - 12 million HSE funded home help hours to over 54,000 people,
 - 5,100 HSE funded home care packages to support 9,600 people
 - NGO funded home care supports (not quantified)
 - Private provision increasing- Home Instead, Comfort Keepers etc(state subsidised through tax relief at marginal rate)
- Total service provision estimated at €340m (HSE delivered €238m NGO Delivered €79 Privately Delivered = €23m)
- Unquantified level of Disability Support Services – PA'a, etc, Day Centres, Residential Units,

The Context (4)

- but
 - 74% carers report that services are inadequate to meet need
 - Average of 9.6 hours extra home support per week is reported to be needed by carers to improve their health
 - Breaks/time out are most frequently identified as things that would make a positive difference
 - (O'Brien 2009)
 - Limited use of other supports
 - Carer Support Groups – 7%
 - Phone Line support – 5%
 - Respite – 13%
- (O'Sullivan, 2008.)

The Context (4)

- Reduction in state support for such services over the next 5 years –
 - (Already evident – Cavan Carers Support service almost cut – got 1 year reprieve, Age Action Carer support programme in Dublin ceasing)
- Greater focus on outcomes not inputs
 - Not so interested in how many support groups you have but more interested in what difference are you making to your clients lives and how do you know this?

What do we mean by Evidenced Based Programmes

- Have undergone rigorous scientific evaluation (control group, longitudinal, statistical difference)
- Have demonstrated their ability to achieve outcomes of importance to family caregivers
- Have been thoroughly described including the intervention, in a peer reviewed scientific journal
- (Birkel, R. 2009)



Presentation by Dr Richard Birkel, June 2009 -

http://www.rosalynncarter.org/agency_resources/

Websites

- <http://www.fpg.unc.edu/~nirn/default.cfm>

Awards

- Discussion

References

- DSFA Statistical Report 2008

<http://www.welfare.ie/EN/Policy/ResearchSurveysAndStatistics/Pages/StatInfoReportsIndex.aspx>

- Analysis of Irish Home Care Market Irish Private Home Care Association (IPHCA) February 2010

<http://www.iphca.ie/IPHCAHomeCareMarketReport.pdf>

- **Family Carers Health Survey** Dr Finian O'Brien The College of Psychiatry of Ireland in collaboration with the Carer's Association November 2009

http://www.carersireland.com/library_other.php

- **Health and Well-being of Family Carers in Ireland: Results of a survey of recipients of the Carer's Allowance** Liam O'Sullivan/Care Alliance Ireland Research Working Paper Nov 2008

<http://www.carealliance.ie/documents/CareAllianceIrelandHealthandWellbeingofFamilyCarersNov2008.pdf>