

## Are you a Carer?

Carers of the people with mental health issues often do not recognise their role as carers. "I'm just his mum", "his friend", "her sister" are common statements.

This exercise may assist families and friends to clarify what help, information or support they may need, what they are already doing, and if they too are carers.

It can also be used by workers to assist carers clarify their role, and what assistance carers may need.

Read the activity statement and tick the box which most closely reflects your situation. If a statement does not apply to you then you do not fill it in.

E.g.: Providing transport - you may provide regular transport, but you may not find it a concern.

<b>Some activities of caring</b>		
<b>Activity for your loved one</b>	<b>Do you ever do this</b>	<b>Is this ever a concern?</b>
Giving or monitoring medication	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Making sure the person is safe in the community	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Making sure the person is safe inside their / your home	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Dealing with crisis	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Providing transport	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Giving emotional support	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Dealing with difficult behaviour	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Dealing with aggression or verbal abuse, living with fear	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Giving money	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Managing their finances	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
House work / living skills / cooking	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Social contact	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
Practical tasks (eg paying bills, legal issues)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
<b>Worrying</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
<p>If you have answered "yes" or "sometimes" to any of these points we believe that</p> <p style="font-size: 1.2em; font-weight: bold; margin: 0;">YOU ARE A CARER.</p> <p>Consider using our assessment system to assist in clarifying your needs.</p>		

## Assessment of my caring role

The role of being a carer is placed on top of your own life circumstances.  
This section reviews the other possible demands in your life.

<b>Focus on your circumstances</b>	
Do you consider yourself a carer?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> unsure
Would you consider yourself a new or experienced carer?	<input type="checkbox"/> New <input type="checkbox"/> Experienced
Are there any other household members including children?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any of these people also care-givers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you care for more than one person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If more than one - how many people do you provide care for?	Number:
Your other life commitments. <input type="checkbox"/> Are you in paid work? <input type="checkbox"/> Family (e.g. children, parents) <input type="checkbox"/> Study/training <input type="checkbox"/> Voluntary Work <input type="checkbox"/> Health issues <input type="checkbox"/> Financial issues. <input type="checkbox"/> Legal <input type="checkbox"/> Other..... <input type="checkbox"/> Other.....	
Is Australia your primary culture and language?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any communication or mobility issues needs? ( eg Vision, hearing, uses walking stick)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your loved one live with you? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes  Is this how you want it to be? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How much control do you feel you have over your own life? <input type="checkbox"/> Total control <input type="checkbox"/> mostly in control <input type="checkbox"/> some control <input type="checkbox"/> little control	
Other issues not mentioned above but are also significant in your life.	

The next section can assist you to become clearer about what may be helpful in your caring role. Read each section and decide whether it relates to you. In each area write down what you **need, want, or think would be helpful to you** - rather than what you know or think is available. There are no right or wrong answers. Being unsure is OK. Remember this is just for you.

<b>How to get help and advice</b>			
Many carers want to know what help and advice is available. The information should be easy to understand and in your own language.			
About mental illness	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Specific mental illnesses	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Treatments	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Medication	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
How to get help for my loved one	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
What to do in a crisis	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Who can help me	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Who does what	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Psychiatric hospitalisation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Mental health act	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Carers rights	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Carers support groups	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Education programs	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
What I can do to help	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Early warning signs of mental illness	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Financial issues for me	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Financial issues for my loved one	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Carers information kit	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Legal issues that relate to my loved one	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Other issues.....			
How would you like to receive this information (eg : written, in person, internet, or in a group etc) ?			

<b>Contact with care workers and involvement in planning of treatment</b>	
Many carers want to be involved in decisions about treatment and care, and want to have regular contact with staff. Families need to be confident in knowing how to help.	
Do you know about becoming the <b>nominated primary carer</b> , and what this means?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Have you been given a primary carer form?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Would you like more help and advice?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
What areas would you like more advice on? How would you like to receive this?	

<b>Relationship with the person you care for</b>	
Relationships between carers and the people they care for can often change especially during times of illness. Do you have an <b>agreed care plan</b> for any future episodes of illness?	<input type="checkbox"/> yes <input type="checkbox"/> no, but I would like more information. <input type="checkbox"/> I don't know what this is, but would like more information

<b>Your wellbeing</b>	
Carers often neglect their own physical and mental health due the demands of caring. Many carers experience a range of effects on their own well being, such as depression or anxiety. Social isolation is a common issue for carers.	
Do you have any health problems that you need to address, or have delayed seeking care?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Do you have a GP that you are in regular contact with about your own health needs? Does your GP know about Mental illness and its impact on families?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Do you have a personal support system that you can rely on (eg: family, friends, support group)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

<b>Risk and safety</b>	
<p>Carers should not have to worry about their own safety, or the safety of the person whom they care. Living without fear is a basic human right for all. <b>Safety issues include: verbal or physical abuse, threat of self harm, financial demands or control, emotional torment or living in any level of fear.</b></p>	
<p>To what extent do you feel worried about your own safety? This includes living in fear.</p>	<input type="checkbox"/> Not at all <input type="checkbox"/> A little <input type="checkbox"/> A lot
<p>To what extent do you feel worried about the safety of the person for whom you care?</p>	<input type="checkbox"/> Not at all <input type="checkbox"/> A little <input type="checkbox"/> A lot
<p>Do you have safety plan?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> Yes, but its not adequate. <input type="checkbox"/> No. I don't need one. <input type="checkbox"/> No, but I would like help with this.

<b>The choice to care</b>	
<p>Carers should have a choice about whether to take a break, or to continue as a 'carer'. If carers decide they want to change the level of caring, or stop caring, support should be available to help them.</p>	
<p>Do you know about support services for you that can assist to take a break?</p>	<input type="checkbox"/> yes <input type="checkbox"/> no
<p>To what extent do you feel you have a choice about changing your level of caring or whether to continue as a carer?</p>	<input type="checkbox"/> A lot <input type="checkbox"/> A little <input type="checkbox"/> No choice
<p>What would be helpful?</p>   	

<b>Other issues</b>	
<p>There may be other issues that you feel are important that have not been covered?</p>	
<p>Issue + What would help?</p>     	

## **Help and advice systems**

### **About mental illness**

Websites  
Books  
Organisations  
Phone help lines

### **Specific mental illnesses**

Websites  
Books  
Organisations  
Phone help lines

### **Treatments**

Websites  
Books  
Organisations  
Phone help lines

### **Medication**

Websites  
Books  
Organisations  
Phone help lines

### **How to get help for my loved one**

Websites  
Books  
Organisations  
Phone help lines

### **What to do in a crisis**

Websites  
Books  
Organisations  
Phone help lines

### **Who can help me**

Websites  
Books  
Organisations  
Phone help lines

**Who does what**

Websites  
Books  
Organisations  
Phone help lines

**Psychiatric hospitalisation**

Websites  
Books  
Organisations  
Phone help lines

**Mental health act**

Websites  
Books  
Organisations  
Phone help lines

**Carers rights**

Websites  
Books  
Organisations  
Phone help lines

**Carers support groups**

Websites  
Books  
Organisations  
Phone help lines

**Education programs**

Websites  
Books  
Organisations  
Phone help lines

**What I can do to help**

Websites  
Books  
Organisations  
Phone help lines

**Early warning signs of mental illness**

Websites  
Books  
Organisations  
Phone help lines

**Financial issues for me**

Websites  
Books  
Organisations  
Phone help lines

**Financial issues for my loved one**

Websites  
Books  
Organisations  
Phone help lines

**Carers information kit**

Websites  
Books  
Organisations  
Phone help lines

**Legal issues that relate to my loved one**

Websites  
Books  
Organisations  
Phone help lines

**Contact with care workers and involvement in planning of treatment**

Websites  
Books  
Organisations  
Phone help lines

**The choice to care**

Websites  
Books  
Organisations  
Phone help lines

**Risk and safety**

Websites  
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Organisations  
Phone help lines

**Your wellbeing**

Websites  
Books  
Organisations  
Phone help lines

**Relationship with the person you care for**

Websites

Books

Organisations

Phone help lines

**Other useful information sites**

Websites

Books

Organisations

Phone help lines