Submission No. 605
(Inq into better support for carers)
A.O.C. 8/7/08

Gordon

30th June 2008

Secretary
Inquiry into Better Support for Carers
Standing Committee on Family, Community, Housing and Youth
PO Box 6021
House of Representatives
Parliament House
CANBERRA ACT 2600

Dear Secretary

I wish to make a submission to the House of Representatives Standing Committee on Family, Community, Housing and Youth's Inquiry into Better Support for Carers.

I request that the name in this submission remain confidential.

My wife and I are over 70 year old parents/carers of a 31 year old son who has severe intellectual disabilities. He requires constant supervision/support in areas of communication, transport, health, food preparation, personal hygiene, money management, and the list goes on.

As your Committee's focus is support for carers, I would like to address two areas of the Terms of Reference.

1. "The practical measures required to better support carers, etc. ..."
   Ageing carers/parents in particular are in critical and immediate need of extensive, high quality respite opportunities that provide appropriately for our loved ones. The current situation offers little or no such support for many.
   To have quality respite readily available for loved ones, (for example – one week per month or equivalent or better) would have multiple benefits.
   Two of which would be:
   - Carers would receive much needed time to recuperate and thus continue their care roll. However an essential to this, is that they are confident that those they care for, are being appropriately cared for.
   - For those being cared for, the benefits of quality, enjoyable and more frequent respite experiences would be of great assistance regarding their ability to adapt to the inevitable transition when their parents/carers die.

2. " … effectively plan for the future"
   Again, from an ageing carers/parents perspective our most constant anxiety is the ever present question - "What will happen to our loved ones when we die?"
   Planning for the future is only possible if there are some options available to plan for. Currently there are little or no options available and consequently no opportunity for us to contribute our vast knowledge and experience to support and assist our loved ones through this transition.
   Unquestionably people with intellectual disabilities are the most vulnerable members in our society and need all the support they can get. The present "Crisis Response" approach is appalling.

I fervently hope that your Committee's findings will have immediate and tangible impact on these long standing unmet needs.

I have attached some supporting items which may be of interest.

Yours sincerely

Gordon