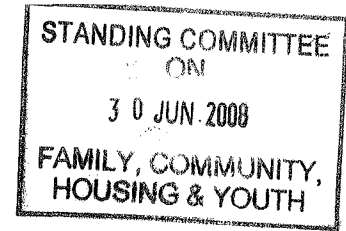


A.O.C. 7/7/08

Submission No. 565

(Inq into better support for carers)



Committee Secretary,  
Inquiry into better support for carers  
House of Representatives Standing Committee on Family,  
Community, Housing and Youth  
PO box 6021 Parliament House  
CANBERRA ACT 2600

I AM A CARER. I willingly contribute to Australian society in many ways. Brought up 3 children and supported 3 Grandchildren all of which gained a good education and support themselves. I have also belonged to and worked for many charitable organisations. As a young woman with the young children I cared for my elderly, crippled grandmother and in later years for my mother-in-law who had dementia. There was no government support then and as I was very healthy would not have sought it.

I FACE THE FOLLOWING PROBLEMS. Four years ago my husband (who had been very fit and healthy and still working at 74) suffered a stroke followed by many mini strokes and I had to give up work to care for him. I have been told that he has amyloid angiopathy and that its most likely that his condition will become worse. He needs 24 hour support. I managed quite well until this year when my own health began to deteriorate. (I am 70 years old). Firstly with worsening rheumatoid arthritis then a growth on my thyroid which will need to be operated on in August. Meantime a severe chest infection made it necessary to place husband in Respite for 2 weeks. Major problems with my right knee which required a total knee replacement resulted in another 2 weeks for husband in respite. Since then I have, with the help of Home care to do his showers, struggled through my postoperative rehabilitation with a lot of determination. There was no assistance for me as we live 30km and the physiotherapy home visits do not extend this far. It has been very difficult until I get clearance from the doctor to drive again. I will need to access Respite again for husband in August for the thyroid operation.....Have been advised that the surgeon and his assistant will cost me \$5180.00 in gap payments which is quite a shock and will be hard to pay..

PARTICIPATING IN SOCIAL EVENTS HAS MANY PROBLEMS. My only regular social event is attending VIEW club luncheon meetings about 10 times as year for about 2 hours each time. I have bought husband a Vitalcall (costs \$321.20 per year) and ask the neighbours to listen out for him while I am out.

This also applies for shopping, doctors visits, haircuts etc. As husband sleeps much of the time and doesn't feel up to much conversation I find it quite lonely and rely on the telephone for much of the communication with family and friends. However I am fortunate that he is not totally dependant and can dress himself etc. but not capable of getting meals, taking medications etc. We do not know how long before he will become completely dependant.

I AM FINANCIALLY STRUGGLING. We are self funded retirees and our income is fixed while everything else is going up at a fast rate. We do own a block of land which is becoming a liability through rates etc. We kept it to build a home more suitable to our age but it is becoming apparent that we will have to forgo that idea and we are in a quandry just now as to the best move. The carers allowance helps a little towards the very expensive doctors, medications, housecleaning,

lawn mowing etc. and fuel for the car . The allowance comes to about \$7 per day ...for 24 hours seven days per week The round trip for specialist visits, xrays etc. is 60km so fuel becomes a big item for us. The costs for respite will be over \$1000 for husband to cover my illnesses in the past 3 months. In addition it is necessary to have all the medications in Webster packs which adds about \$80 to each respite period.

We thank the government for the bonuses but would very much hope that they will be reviewed however we hold out the hope that consideration could be given to some of the other problems we encounter.

Example. 1. We have paid into the MBF (both medical and hospital) for over 55 years and believe that we have not only felt selfsupporting but have saved the government a great deal of money (just my own health problems in the past 10 years over \$100,000.00) We now find it a struggle to keep up these contributions but will continue as long as we can.

2. State taxes by way of land tax, stamp duties, levies etc. Electricity, water. Car registrations and licences .Rates. Handicapped parking permits etc. all of which do not have any concessions for selffunded retirees.

I WORRY ABOUT THE FUTURE AND THE MOST STRESSES I ENCOUNTER ARE:

What will happen to husband or myself if I can no longer care for him.

What will happen to me if my health fails.

Access to more home care at a price I can afford.

This is a small town and the local doctors do not bulk bill medicare...this results in some fairly considerable costs. They have also closed their books and taking no new patients so there is no choice.

I am enclosing a list of some of our expenses to give an idea of the financial problems which face us and many other folk in a similar position. I realise that we are in a better position than many at this stage and my heart goes out to them as they try to make ends meet. I also recognise the many costs we have to budget for which are well in excess of \$5000.00 would not be a problem if our health had not failed ...we would have done all or most of the items marked with asterix ourselves.

I hope that this summary of my concerns will help with the big picture when reviews are made.

Yours faithfully

(Mrs) Norma

23/6/08

1

Recognising that there are a lot of very young carers out there could I make the following suggestions .

1. That all young carers receive respite and support to enable them to participate in sports independent of their role in the home.
2. That all young carers receive an education support person and/or coach to assist them to maximise their educational opportunities.
3. That all carers receive assistance and encouragement to access private health care through affordable hospital and medical funds. This choice would go a long way toward making carers feel independent and remove much of the worry attached to need for surgery and lengthy waiting lists in public hospitals. My experience (public hospital) is that it is very difficult to organise respite, travel, aftercare etc. only to have it cancelled at the last minute and have to repeat the whole process.
4. While the aged care system is very good it seems to be very top heavy with administration in comparison to “hands on”. Perhaps this needs to be looked at.