

# Women as Carers in Mental health

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Carer and Chief Executive Officer



#### **Tandem COVID-19 response for Family and Friends in Mental Health**

#### **Mental Health Carer Support Fund boosted by 130k**

•COVID-19 up to \$300 cash per carer with AMHS

#### Tandem Support and Referral Line 1800 314 325 expanded

- Tailored general advocacy, NDIS advocacy and Royal Commission support
- COVID-19 Warm Line 83.5% of callers were women March-May
- Proactive contact with carers and carer lived experience workforce

#### Website with 3 COVID-19 inspired sections

- COVID-19 support for family & friends
- Wellbeing activities at home
- Links to official information on COVID-19
- Weekly FREE Guided meditation session on facebook
- Twice weekly ENEWS
- Fortnightly Zoom catch up for members
- CRAFT activity launched for staff and members



#### **Mental Health Carers – National Picture**

- Almost 1 million female (976 000 (36%) carers provided regular assistance to a partner, family member or friend with mental illness
- 36% of all mental health carers had been providing care for at least 10 years.
- The best outcomes are achieved when caring is a choice, rather than a response to the absence of any other satisfactory alternative
- Mental health carers have different needs and experiences to other carers due to the episodic nature
  of mental health issues and the characteristics associated with mental illness. They are more likely to
  provide emotional support than other types of carers.
- Differences in the roles and challenges faced by mental health carers compared with other carers
  translate into differences in the types of support they need from government, employers and the
  broader community.

  Productivity Commission Mental Health, Draft Report, 2019



Female (2/3+) of working age (72.8%),

# age range(35–64 years) married (53.5%) OUR MENTAL HEALTH CARERS



They are partners, children, parents, siblings, friends and neighbours.



15% are young carers. (below 25 years of age)



36 hours of support is provided per week.

**DID YOU KNOW 60,000 VICTORIANS SUPPORT PEOPLE LIVING WITH MENTAL HEALTH ISSUES?** 

**UNPAID MENTAL HEALTH SUPPORT** 

\$3.3 BILLION P.A.





#### **Victorian Mental Health Carers**

- Mental health carers often do not identify as carers
- 2/3rds are women or girls
- The majority of the Vic Carer Lived Experience Workforce (CLEW) are women and Carers supporting at least one family member. This workforce is under resourced, undervalued and underpaid.
- Carers of people with unpredictable episodic conditions, especially when these episodes are frequent, may find it harder to plan their working responsibilities around their caring role
- one-fifth (22%) of mental health carers are providing informal care to more than one individual
- 15% of carers are under 25 and at risk of leaving school, at risk of developing mental health issues and not gaining stable employment
- Roughly half of primary carers have been providing informal care for ten or more years
- CALD and lower socio-economic carers spend more hours providing care
- 38% of Primary carers report caring for 40 or more hours per week.
- 64% of applicants for carer support fund financial support are female



Non-COVID-19 related health and social services may be scaled back, meaning that families need to provide greater support.

Women are at the forefront of the COVID-19 response as the default unpaid family caregivers and the majority of unpaid or poorly paid community health workers.

United Nations Policy Brief The impact of COVID-19 on women



# **General Impact of Covid-19 on Carers in Mental Health 1**

- carers calling our service have been more emotionally distraught as it is harder to get through to the 'right' services
- Fear of risk of relapse has increased with associated impacts for families
- Less consistent responsiveness than usual feared and experienced from services to families seeking support due to pressure on hospitals
- All group activities respite and social postponed impacting social isolation
- Libraries, Galleries, movies and the arts all on hold having an impact on both consumers and families
- Financial strain due to impact of casual and part time work opportunities being jeopardized in industries such as NDIS support, health, hospitality, the arts etc... This has impacted carers themselves and for consumers leaving carers to cover the financial responsibility
- Increased concern for vulnerable children and young carers
- Some of the barriers to engagement with technology have included sheer and understandable emotional exhaustion around having to accommodate more change/skilling



the pandemic has also made starkly clear the way in which the daily functioning of families, communities, and the formal economy are dependent on this invisible work.

United Nations Policy Brief The impact of COVID-19 on women



# **General Impact of Covid-19 on Carers in Mental Health 2**

- Social restrictions have led to increased tensions between carers and consumers which in some cases has led to them reaching a crisis point with increased calls to CATT.
- Concern has also been raised by carers about what would be hospital's policy for keeping consumers safe during an outbreak of COVID-19 in an inpatient unit.
- Families having significant increase in stressors around multiple support roles becoming stress points eg: aged parents, adult children returning home due to job losses, home schooling responsibilities, working from home
- We have also seen an increase in carers having been subjected to family violence and elder abuse
- Older carers being isolated and disconnected from consumer. When trying to maintain contact there is added anxiety around COVID-19 restrictions
- Housing and financial issues impacting across family and support systems eg: use of Carer support fund has increased.
- Fear of accessing health services ED/GP/inpatient and community services due to COVID
- Increased requests for support from families wanting to support isolated consumers who are further triggered by COVID-19 restrictions and fearful of receiving contact and support



## NDIS related issues arising for carers of those with psychosocial disability 1

'The NDIS assumptions around the operation of market power in consumer choice are very male and flawed for this reason I believe. They are dealing with a community of many women whose agency, dignity and capacity has been badly damaged by brutal systems where lack of accountability is built into their design'

Tandem member and Carer regional Victoria



## NDIS related issues arising for carers of those with psychosocial disability 2

- carers have shared being expected to take on a greater than usual role without discussion /
  negotiation around how that fits their broader life, because of reduced face to face supports
  available. In some cases it has meant family members moving home after years in out of home
  residential support.
- Others have continued difficulties with negotiating the NDIS Access process to get a family member onto NDIS and in being phone based, difficulty with conference calls to assist advocacy particularly for older women where usually face to face service would be appropriate.
- Rights to individuals to access NDIS on the basis of previous engagement with defined programs (eg. PIR / community mental health support) ends 30 June this year. It is difficult timing for many carers to now advocate for family members to have access when NDIA refer to consumer rights to privacy / consent. Frequently the consumer does not recognise their support needs. COVID-19 has amplified these issues and slowed progress for families on these matters.



# NDIS related issues arising for carers of those with psychosocial disability 3

- Concern about access to respite access through Carer Gateway Services is a top issue for mental health carers
   accessibility during COVID-19 and relevancy when people are unwell and similar issues to the NDIS re not wanting to access respite when at risk of infection.
- The generic nature of carer gateway services for mental health carers struggling with their own mental health or emerging mental health carers need specific mental health carer supports that are relevant to their unique caring role



While women will step in to respond to the COVID-19 pandemic, the unpaid labor they provide is not infinitely elastic. Without adequate support, the long-term costs of stretching women's work to patch up the holes in public services provision can be enormous.

United Nations Policy Brief The impact of COVID-19 on women

The trusted voice of family & friends in mental health

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