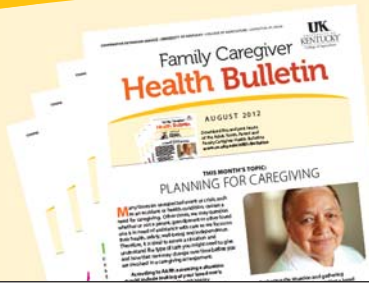


Family Caregiver Health Bulletin



JUNE 2015

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THIS MONTH'S TOPIC: MILITARY FAMILY CAREGIVERS

According to the Rand Corporation, 1.1 million of the 5.5 million military caregivers in the United States assist veterans and service members who served after the September 11, 2001 terrorist attack. While pre-9/11 caregivers are more likely to resemble that of a civilian caregiver (an adult child caring for an aging parent or an aging spouse caring for an aging partner and dealing with age-related conditions), the post-9/11 caregiver is typically a young woman who is raising dependent children. In addition, many post-9/11 caregivers are friends of the care recipient. The post-9/11 care recipients are younger and suffering from traumatic brain injuries, hearing/vision problems, mobility issues, chronic and neurological conditions and mental health/substance use. Despite the physical and psychological disabilities these caregivers may face, many military caregivers do not identify themselves as such and as a result, they do not seek support, yet their need to provide care may go on for many decades.



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Consequently, military caregivers are at increased risk of social isolation and physical and emotional stress and strain, including feelings of hopelessness and depression. In fact, 38 percent of post-9/11 caregivers meet criteria for probable depression, but only a third of those with depression are actually receiving mental health treatment. As compared to non-caregivers, military caregivers, especially those who are post-9/11, demonstrate worse health, greater strained family relationships and struggles in the workplace, including financial worry. Among the 35 percent of post-9/11 caregivers who suffer from depression, not even a third seek help.

Rand researchers pose and continue to research the following questions geared to help America prepare for the long-term effects of military caregiving:

- “How do decades of providing care affect a military spouse?”
- “What happens when a parent can no longer care for their veteran and perhaps need caregivers themselves?”
- “How does caring for a veteran parent affect the health and well-being of the child of a military family?”

The Rand Corporation found a number of programs that support military caregivers in the following areas:

- Social support (support groups)
- Financial support (loans, donations, legal assistance)
- Education/training (caregiver instruction)
- Wellness activities (physical activity, stress relief)
- Patient advocacy (care coordinators, liaison services)
- Mental health care (beyond normal institutional channels)
- Respite care (temporary care to provide caregiver a break)
- Health care (beyond normal institutional channels)
- Religious support (spiritual guidance/counseling)

- Financial stipend (compensation for caregiver’s time)

The Rand study also suggests four over-arching recommendations for better supporting military caregivers:

- **“Empower caregivers”** with high quality continuing education, health coverage and increased awareness to build skills and confidence to help reduce the stress and strain of their duties.
- **“Create caregiver friendly environments”** in both the work and health care settings that offer understanding, support and protection from discrimination.
- **“Fill gaps in programs and services”** that are available, especially in programs such as respite care.
- **“Plan for the future”** including financial and legal planning for caregivers.

Rand recognizes that implementing such recommendations will require several individuals and units to work together, including lawmakers. But the more that post-9/11 military caregiving needs are made known, the better we can work together to support the integration and coordination of programs and services. FCS Extension, for example, encourages the foundation of a strong and healthy family to help military caregivers confront their challenges.

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