Executive Summary

In 2014 the Idaho Caregiver Alliance (ICA) conducted a statewide assessment to describe the demographic characteristics and needs of primary caregivers and identify available respite services. Respite or a “time-out” provides a caregiver with a short-term break from the constant responsibilities of caring for a dependent child or adult and can extend the caregivers ability to provide home-based care. This in turn, can enhance the quality of life for both the caregiver and care recipient and reduce costs associated with facility-based care. For example, in 2012, the number of unpaid caregiving hours in Idaho was approximately 8.5 million hours and valued at $1,037,881,136.1

The assessment provides a snapshot of caregivers and the individuals they care for, experiences associated with caregiving, and what role respite support may play in the lives of caregivers. This information will be used to identify priority needs and as a baseline for planning and evaluation.

The caregiver assessment findings reported in this document are based on a web-based survey distributed to primary caregivers through email distribution lists and web-sites maintained by organizations providing services to caregivers and/or recipients of care. In addition, the survey and/or postcards announcing the survey were distributed at events designed for caregivers, individuals receiving care, and/or representatives from organizations who may have contact with caregivers.

The capacity assessment of available respite providers was conducted using a mixed methods strategy of a review of online resources and solicitation of information about resources from key informant agencies. The findings were organized by region of the State and coded by whether the provider was listed in the Idaho 2-1-1 Careline database and the availability of respite services.

Portrait of an Idaho Caregiver

The caregiver survey was completed by 261 individuals. The majority of participants were female (82.5%), over the age of 55 (58%), and had been care for one individual for more than 21 hours per week (69.7%) for more than four years (63.2%). Approximately two-thirds of the respondents were employed on either a full- or part-time basis and an additional 10% were looking for employment. Almost all (96%) of the participants had access the internet in their homes.

The most common relationships between caregiver and care recipient were minor or adult child (35.5%) and parent or parent-in-law (33.6%). Only 27% of respondents indicated they had used respite services in the past six months with use more common among younger caregivers and those providing care for a longer period of time. Of the caregivers who had not previously used respite, 77% stated they would use the support once a month or more. The most frequently identified barriers noted by those who had not used respite were: 1) locating and paying for services; 2) concerns related to an outsider caring for their loved one; and 3) the person they provided care for

1 Across the States: Profiles of Long-Term Care and Independent Living, Idaho, 2012. Across the States: Profiles of Long-Term Care and Independent Living, Idaho, 2012
Identified Priority Needs and Future Action

Caregivers would use respite services if available in their community. Based on the findings from this survey, caregivers know the benefits of respite (i.e. rejuvenate, do tasks and chores, attend to needs of other family members) although 69.5% did not know where to find respite services and 57.7% indicated they would need assistance with making arrangements for respite.

- Future action should focus on effectively promoting respite and other supports to caregivers.
- Use a common language for caregiver supports – make it easy for consumers to understand the “who, what, and how” of respite.

Caregivers need assistance overcoming commonly perceived barriers. In addition to needing information about available respite services, caregivers need assistance with overcoming common barriers. Securing quality respite providers, having an “outsider” come into a person’s home, and cost/financing are top-ranking barriers to caregivers.

- Caregivers need to be empowered to make informed decisions about providers and the type of services needed.
- Consumer and respite provider education is a priority. Respite providers need to be supported in their efforts to provide quality services.
- Future actions should focus on promoting standards of care and development of effective consumer-focused feedback mechanisms.

Access points for information and services are needed. Caregivers who had used respite received information from a variety of sources including case managers, social workers, friends and family, or by word of mouth. For caregivers who had not received respite information, they identified internet, friends and/or family, or a health care provider as preferred sources for information.

- Future actions should focus on consumer-driven access points where caregivers can obtain the information they need regarding respite services.
- Health care providers were identified as a preferred source of information. Access to information through this “trusted” source should be expanded.

Many caregivers in Idaho are full-time or part-time employees. Two-thirds of Idaho caregivers are employed (outside the home) in full-time (37%) or part-time (20%) positions or looking for employment (10%). The impact of caregiving on work ranges from using vacation/sick leave, to reducing hours, to leaving paid employment.

- Engagement of employers and policy makers in efforts to champion the need for and access to sustainable, high quality services for caregivers is imperative.

Previous respite use did not meet the needs of most caregivers. Of the caregivers reporting the use of respite services, nearly two-thirds (61.7%) indicated services did not cover their needs.

- Further exploration of the unmet needs of caregivers who have used respite services is warranted.