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Nordic Council of Ministers  
Office in Estonia



MTÜ Eesti  
Omastehooldus

## Questionnaire of carer welfare and health

„Rohkem Sa hoolid Eestis, Lätis, Soomes“

MYSELF – More You Care in Estonia, Latvia, Finland

30 people answered the questionnaire!

### Main information

1. In full-time employment were 12 (40%) people, in part-time employment 2 (6,6%), retired/pensioner 9 (30%), one of them was working part-time and one was unemployed, 6 people (20%) were unemployed and one respondent did not mark the employment status.
2. 7 people cared for their spouses, 14 cared for their or spouse's elder, 7 cared for their or spouse's child, 3 cared for their other relative and 3 people cared for someone else (friend, neighbor). 5 respondents cared for two people simultaneously, one of which cared for twins. Most of the cared for people are as described in the Family Law Act of Estonia the ascendants or descendants of adult family member who is obligated to provide maintenance and care. This notion also describes the status and care responsibility of informal carers.
3. Average age of the cared for person is 61 years old. Youngest cared for person is 8 years old and oldest 92 years old.
4. All respondents have described the care needs of their cared for person. The most occurring assistance and care is provided with personal hygiene, cooking and feeding, managing medication, dressing, with doctor visits and housekeeping. These are all activities of daily living.
5. 13 respondents receive caregiver support.
6. 8 people (27%) are the guardian of their cared for person.
7. Respondents assist their cared for persons daily with housekeeping (22), shopping and transport (15), personal assistance (19), medical assistance (16), repair, construction and gardening works (10), using technical aids (11), providing financial aid (12), managing paperwork (12) and emotional assistance (25).
8. 3 of the respondents have been caring less than a year, 1-5 years 7 (23%), 6-10 years 8 (27%) and over 10 years 12 (40%).

9. 73% of respondents live in the same household with their cared for person, in the same city or municipality 20% of respondents. Only 2 people live in different municipalities.

10. The care responsibility have affected negatively 14 respondents, while for 5 people families the care responsibility have not affected their daily operations.

11. The biggest support and help comes from the other family members and friends to fulfill the care responsibilities(22 answers).

12. 13 people feel obliged to provide care for their family member.

13. In a situation, where the cared for person needs constant and intensive care, 15 people are ready leave employment; in addition, 14 respondents would be ready to leave employment depending on the circumstances.

14. Circumstances in which the respondents feel ready to leave or have left from work: increasing care needs, the need for constant supervision, dangerous situations in cared for person's daily life, doctor visits. It is noted, that some respondents have already left employment, they have moved to live with the person with care needs, being separated from their spouse. It is difficult to recuperate and resume employment after the active caring have ended.

### **Work life**

15. 8 respondents were working in public sector and 8 were working in private sector. None of the respondents are active in the third sector.

16. 13 people are regular employees, 3 are departmental managers and 1 is member of administration.

17. 17 respondents have talked about their care responsibilities towards the family member at their workplace, only 1 respondent have not considered it necessary.

18. 12 respondents have slightly or not at all received support and understanding at their workplace in relation of their care responsibilities.

19. In relations of different practices at workplaces when dealing with absence of employee with care responsibilities due to the cared for person's doctor's visit, unexpected illness etc. the most dominant is the arrangement with administration(14 times), also flexible working hours(10), working based on the schedule or shifts(4) and teleworking(4).

20. The health and welfare of employees is an interest for employers at 13 workplaces; 4 respondents have experienced negative attitude towards it.

21. Based on the health status or other circumstances, 10 respondents have thought about early retirement; 6 of them mark the care responsibility as the possible cause.

23. 4 respondents have frequently felt that they want to end caring and focus on their work, 9 people felt that seldom and 6 people have not felt it.

24. Due to the care responsibilities, more than half of the working informal carers have experienced difficulties with keeping work agreements, have given up on new challenges, work-related travels and additional training and have not been able to participate in work-related events.

25. Taking in account 2 previous questions, 5 respondents have felt shame, 9 have felt offended and 7 have felt guilt in relations of situations occurring in work life.

### **Personal health and coping ability**

26. 3 respondents evaluate their health very good in comparison with their peers, 6 people mark it good, 18 people mark it average and 2 respondents mark it as poor.

27. 28 people have more or less experienced stress in relations to the care responsibilities. 8 respondents are under frequent or constant stress.

28. The current life moment with the cared for person is at least bearable for 26 respondents, out of which 10 mark it as difficult and 1 respondent marks it as extremely difficult.

29. Only 3 people feel like they have enough time for themselves beside the care responsibilities. It is stressful on one way or another for 28 people to cope with care responsibilities in addition to taking care of their family and fulfilling their work responsibilities. 22 respondents feel irritated when being with cared for person. 20 respondents feel that the cared for person is impacting negatively their relationships with other family members and friends. Only 5 people do not feel tired in the company of the cared for person. 20 respondents feel that their health has suffered due to the care load. 23 respondents feel that the care load limits their freedom of choice. 21 respondents feel that their socializing is limited due to the care load. 12 respondents feel frequently that they have lost control over their life due to the illness of their family member or close one. 21 respondents feel insecure towards their cared for person. 25 respondents feel that they have to improve their caring skills.

30. The most important item when taking account the carer's coping ability is the support of family – very important for 23 people, also important are hobbies(19), friends(23), information and experience groups available through NGOs(20), faith and spiritual assistance(17), counselling(19), working and work environment(18) and „one day at a time“-mentality(20).

## **Social services**

31. Satisfaction with services offered to the cared for person.

1)Homecare service provided by local municipality is not used by 20 respondents, 3 people are satisfied with the service and 1 respondent is not satisfied.

2)Support person's service is not used by 22 respondents, out of which 1 person have not heard about the service, 1 person is very satisfied and one person is not satisfied.

3)Personal assistant's service is not used by 21 respondents, 1 person is very satisfied and 1 person is not satisfied.

4)Daycare service is not used by 17 respondents, 1 person have not heard about the service, 2 people are very satisfied, 1 person is satisfied and 1 person is not satisfied.

5)Physical therapy is not used by 15 respondents, 1 person have not heard about the service, 1 person is very satisfied, 4 people are satisfied and 3 people are not satisfied.

6)Respite care is not used by 19 respondents, 2 people have not heard about the service, 1 person is very satisfied and 1 person is not satisfied.

7)Other privately paid services are not used by 13 respondents, 4 people have not heard about these services, 6 people are satisfied and 1 person is not satisfied.

8)NGO services are not used by 19 respondents, 2 people have not heard about these services, 1 person is satisfied.

9)Social transport service is not used by 16 respondents, 1 person have not heard about the service, 5 people are very satisfied and 3 people are satisfied.

10)Educational services are not used by 18 respondents, 2 people have not heard about the services, 1 person is very satisfied and 4 people are not satisfied.

11)Medical services are not used by 1 person, 2 people have not heard about these services, 4 people are very satisfied, 13 people are satisfied and 6 people are not satisfied.

12)Rehabilitation services are not used by 14 respondents, 1 person have not heard about the services, 3 people are very satisfied, 3 people are satisfied and 3 people are not satisfied.

13)Other services are mentioned once – general practitioner's service that the respondent is not satisfied with.

## **Health**

32. 2 respondents have evaluated their health status to be very good, 24 people marked their health as satisfactory, 4 people marked their health as poor.

33. 3 respondents evaluate their health status compared to the last year as being better than last year, for 14 people the health status is similar, 13 people evaluated their health as worse than last year.

34. 13 respondents have permanent health issues or disabilities that limit their daily life. Most occurring are back problems, joint issues, diabetes, radiculitis, arthritis, migraines, depression, high blood pressure and varicose veins.

35. 16 respondents use medications daily – 4 people use one, 10 people two, 1 person uses three and 1 person uses four medications.

36. 19 respondents are concerned about their health – care load related back problems, joint issues and cardiovascular issues. Carers are also worried about their resilience, stress and ageing.

37. How do carers evaluate their mood?

15 respondents are happy with their life, 19 people have given up on some activity or hobby, 3 people think their life is meaningless, 10 people feel often sad, 19 people are usually in a good mood, 12 people fear that something bad may happen to them, 11 people are satisfied with their life, 13 people feel often helplessness, 13 people think that now is a good time to live, 2 people feel that they are not fit for anything, 12 people think they are full of eagerness, 6 people find their situation hopeless, 9 people think that other people are doing better than them.

38. Carers have wished for diminished care load, better health, opportunity to be in active employment, cope with their life, home assistance. One person feels that caring is the calling and wishes to help elderly people. Carers that care for younger people are worried about their future and the future of the children. It is also marked that there is the risk for carer burnout and in order to avoid this some type of carer's leave should be available (one week per year).

### **Background information**

39. Questionnaire was answered by 23 women and 7 men.

40. Average age of respondents were 55 years of age. The youngest was 25 years old and the oldest 71 years old.

41. Level of education - Lower secondary education(4), Secondary and Vocational secondary education(16), Bachelor's degree(9) and Master's degree(1).

42. 15 respondents described a conflict situation between themselves and cared for persons. These are specific cases with specific solutions, but common features are communication skills, consistency, calmness and empathy.